**St. Pius Catholic School**

**Athletic Consent Form**

**2020 – 2021**

Dear Parent/Guardian,

We are excited that your child has chosen to participate in the St. Pius Athletics Program. Please note we have made a few changes this year to enhance you and your child’s overall understanding and satisfaction in the St. Pius Athletic Program. We hope to have a wonderful school year! (Please initial each line)

\_\_\_ I understand the sports fee and agree to pay this fee for each sport in which my child participates.

\_\_\_ I understand the **Academic Policies** that have been established to stay eligible during the season.

\_\_\_ I understand the **Tryout Process** if needed and agree to results of any placement of my student-athlete.

\_\_\_ I understand the **Volunteer Requirements** as a parent/guardian.

\_\_\_ I understand that if my student-athlete does not complete a season for any reason, except injury, they will not be able to register for the following sport season.

\_\_\_ I understand that the sports uniform will be returned at the end of the last of the last competition. If my child does not attend the last event the uniform is due no later than 7 days from last game. If the uniform is not returned on time, there will be a fee of $100.00.

(Please fill out the below information in blue/black ink.)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has my permission to participate in the St. Pius Athletic Program.

(Student-Athlete)

Sport: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student-Athlete Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_