



# SOUTHERN CHRISTIAN ATHLETICS

Registration Form

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## PLAYER INFORMATION

Name \_\_\_\_\_ Age \_\_\_\_ Grade \_\_\_\_ School Year \_\_\_\_ - \_\_\_\_

Address \_\_\_\_\_ Birthdate \_\_\_\_ / \_\_\_\_ / \_\_\_\_

City/State/Zip \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

Parents \_\_\_\_\_ Email \_\_\_\_\_

Mothers Phone \_\_\_\_\_ Fathers Phone \_\_\_\_\_

Church \_\_\_\_\_ City/State \_\_\_\_\_

Pastor \_\_\_\_\_ Phone \_\_\_\_\_

School or Homeschool Covering \_\_\_\_\_  No Cover School

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_ Phone \_\_\_\_\_

Admin/Principal \_\_\_\_\_ Admin Email \_\_\_\_\_

Are sports offered at your school? \_\_\_\_\_

Names of siblings registered at SCA \_\_\_\_\_

## SPORTS REGISTERING FOR at SCA *(check all that apply)*

Football  Volleyball  Cheerleading  Cross Country  Tennis  Rifle  Bass Fishing Team

Girls Basketball  Boys Basketball  Baseball  Softball  Track  Archery  Other \_\_\_\_\_

*\*The Annual Registration Fee must accompany this completed form to be considered registered with SCA.*

### (To Be Completed by SCA Admin)

Birth Certificate  Current Physical  SCA Waiver  SCA Gym Waiver  ACSC Concussion Form

ACSC Liability Waiver  AVF 1 (school/cover school)  AVF 2 (no cover school)  Student Transfer Form (gr.9-12)

Policy Manual  Policy Manual Agreement Form  Parent/Player/Coach Agreement

Registration Fees/Discounts:  Payment Plan

SCA Registration Fee  Athletic Fee \_\_\_\_\_  Duffel Bag/Backpack  Fundraiser Fee  Multi-Sport Disc

Sibling Disc.  Family Max Fundraiser  Other \_\_\_\_\_

Total Due \$ \_\_\_\_\_ Amount Paid \$ \_\_\_\_\_ (Cash/ Check # \_\_\_\_\_ / Other \_\_\_\_\_) Balance \$ \_\_\_\_\_



# Southern Christian Athletics Program Liability Waiver

The Liability Waiver Form must be completed and signed by the parent or guardian for each student athlete before participation in a Southern Christian Athletics practice, game, activity, contest, or event. The original must stay on file with Southern Christian Athletics.

## PARENTAL CONSENT:

I (We), the undersigned parent(s)/guardian(s), do hereby grant permission for my/our child \_\_\_\_\_ to participate in the Southern Christian Athletics Program during the \_\_\_\_-\_\_\_\_ school year.

### I (We) acknowledge and understand the following:

\_\_\_\_\_ A. That while participating in this program, there is a possibility of illness or injury to my child and further acknowledge that my child is assuming the risk of such physical illness and/or injury by their participation. I (We) fully indemnify and hold harmless, and forever discharge Southern Christian Athletics, as well as its representatives, volunteers, directors, officers, assigns and attorneys from any and all claims, demands, actions, causes of actions, or suits arising out of any injuries or illnesses, known or unknown, which have resulted or may in the future result from any SCA sponsored athletic game, activity, contest or event.

\_\_\_\_\_ B. I understand that Southern Christian Athletics has established rules and regulations regarding conduct, safety, and sportsmanship by which my child must abide, and that I(we) and my child will be responsible for their failure to abide by those rules and regulations.

\_\_\_\_\_ C. In order that my child may receive emergency medical treatment in the event of illness or injury during any SCA event, activity, or program, I (We) hereby authorize Southern Christian Athletics' representatives to obtain medical treatment for my child for such illness or injury. I (We) hereby hold Southern Christian Athletics and its representatives harmless in the exercise of this authority. I (We) agree to assume full responsibility for any and all medical expenses that may be incurred on behalf of my child as a result of their participation in the Southern Christian Athletics program. I/We agree to never make a claim for insurance to or against Southern Christian Athletics and will commit to using only our family/personal insurance on any occasion that may arise.

### My/Our child is covered by the following existing medical health insurance policy. In the event an emergency was to arise, please use the following information:

Insurance Company \_\_\_\_\_ Policy/Group Number \_\_\_\_\_

Doctor \_\_\_\_\_ Phone \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Emergency Contact Phone \_\_\_\_\_ Relationship to Child \_\_\_\_\_

Allergies or Medications \_\_\_\_\_

### I (We) have read and understand A, B, and C above and give my/our child permission to participate.

\_\_\_\_\_  
Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

\_\_\_\_\_  
Athlete Signature \_\_\_\_\_ Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

# Athletic Handbook and Code of Conduct

Southern Christian Athletics exists to glorify God as we play competitive sports. We do this by developing and demonstrating Christ-like character among our team, developing the skills God has given our athletes, and bringing glory to God by being salt and light as we play.

Participation in Southern Christian Athletics is completely voluntary. By participating with Southern Christian Athletics, you are agreeing that:

- the coaches are the authority on the court and/or field
- you will support the coaches at all times
- that you nor your child will not argue with or belittle referees, umpires, coaches, teammates or opposing players.

Any behavior contrary will receive a warning. Continuous disregard for the Code of Conduct will result in disciplinary action and/or possible expulsion. Immediate participation termination will be exercised in extreme situations if needed.

I have read the current Southern Christian Athletics Handbook and Code of Conduct, and I agree to abide by the handbook in its entirety. I/We agree to abide by the terms listed above and in the SCA handbook. I/We agree to fulfill our financial obligations to SCA and understand failure to comply with the terms of this agreement could jeopardize my child's opportunity to play with Southern Christian

Parent/Guardian \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Athlete \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

*\*This section is not to be signed until both athlete and parent have read the SCA Athletic Handbook.*

## Photo Release

\_\_\_\_\_ I grant to Southern Christian Athletics, its representatives, and volunteers, the right to take photographs of my above-named child in connection with activities relating to SCA.

\_\_\_\_\_ I authorize SCA to use and publish photographs in print and/or electronically.

\_\_\_\_\_ I agree that Southern Christian Athletics may use such photographs *with or without my child's name* and for any lawful purpose, including for such purposes as publicity, illustration, advertising, and web content.

\_\_\_\_\_ I **do not grant permission** for my child's photo to be used by SCA for any purpose.

## 24 Hour Policy

\_\_\_\_\_ I/We have read the 24-hour Rule Policy as stated in the SCA Athletic Handbook. I/We agree to abide by this policy as set forth by SCA.

## Uniform Waiver

I understand that the uniform issued by Southern Christian Athletics (SCA) is:

\_\_\_\_\_ 1. the property of SCA and must be returned in good condition at the conclusion of the final game of the season. *\*Cheerleading excluded*

\_\_\_\_\_ 2. my responsibility to take proper care of, and that if it is damaged or lost, I will have to pay full replacement costs for the uniform, to include setup fee for printing if required.

[www.southernchristianathletics.com](http://www.southernchristianathletics.com)