

St. Edwards School 2010 Fall Sports Registration – Due June 4th

Last Name	First Name	Gender	Grade (Fall 2010)
Address		Home Phone	
City	State	Zip	Date of Birth
Email Address		Cell Phone Father	Cell Phone Mother
Father's Name		Work Phone	Home Phone
Mother's Name		Work Phone	Home Phone

Sport	Fee	Check box to register for each sport	Check box if you are interested in coaching	Check box if you participated last year	Add fee for each sport selected
Volleyball	\$100.00				
Cross Country	\$20.00				
Uniform Size (circle one) ADULT---					
Small	Medium	Large	XL	Total Fees	

Remember it is mandatory to have your signed Medical Examination Form, Volunteer Form and Emergency Consent Form on file before you are eligible to practice or participate in any game.

You must return this signed Registration Form, Emergency Medical Consent and Physical Form along with your participation fee no later than **Friday, June 4th** to the school office. Please make your check payable to St. Edwards Athletic Association (no cash will be accepted.)

Archdiocese of Milwaukee

Parent's and/or Legal Guardians Risk Acknowledgement and Consent to Participate Form

My/Our child wishes to participate in sports selected above during the 2010/2011 school year. I/We realize that there are numerous risks involved in participating in the sports listed above. These risks could involve (but are not limited to): sprains, contusions, broken bones, lacerations, concussions, permanent disability, internal injuries, paralysis and possibly death. These risks could impair my/our child's future abilities to earn a living, engage in business, social, and recreational activities and to generally enjoy life. I/We have been informed about the various risks associated with our child's participation and the potential injuries that may occur.

I/We assume all responsibility and certify my/our child is in good physical condition and has undergone a sports physical in the past two years. Further, I/we are unaware of any medical condition that would inhibit my/our child's participation.

As a condition of my/our child's voluntary participation in the sports listed above, I/we agree to accept all the previously mentioned risks as a condition of my/our child's participation.

Signed this _____ day of _____, 2010.

Parent/Legal Guardian
Form: 6145.2(b) Updated 8/16/2007

Parent/Legal Guardian