



BIRMINGHAM PUBLIC SCHOOLS
STUDENT ATHLETIC PARTICIPATION AND PARENTAL APPROVAL FORM
FOR BCS AND SECONDARY SCHOOLS

BCS PROUD DADS SPORTS PROGRAMS

STUDENT NAME _____ GRADE _____

BIRTHDATE _____ SEX _____ SCHOOL _____

I hereby give my consent for the above (cover sheet) named student to engage in athletics during the current year, and to accompany the team as a member on its trips. The schools are not liable for injuries or the cost of medical care resulting from these injuries.

I also give my permission for immediate emergency medical attention.

I have read this form and am aware of the contents of the student suspension and sportsmanship policy.

I carry accident/health insurance. Yes ____ No ____ Name of Company _____

Please Note:

- If the student athlete has enrolled in the Birmingham Public Schools authorized student accident insurance program, the accident insurance plan is applicable for all sports except senior high tackle football unless the premium for such coverage has been made.
- In addition to this form, a standard secondary school physical examination form, emergency treatment card, and pay to participate fee or form must be completed and handed in prior to participation in any athletic activity.
- By signing below, consent is hereby given to release my son's/daughter's Educational Records for the purpose of any athletic team or individual nominations such as Academic All-State. I understand that my student's transcript or GPA may be submitted for these awards.
- At times, BPS may choose to not provide transportation to and/or from School District athletic events. Where transportation will not be provided by BPS, parents will be given advanced notice that it will be their responsibility to see to it that their student is present at the site and/or returned from the site at the appointed time. Where transportation is not provided, the School District and coaches will not participate in, or assume responsibility for, arranging transportation to and/or from events for students.

This application to participate in athletics at school is voluntary on my part and is made with the understanding that I have never received money or merchandise in any amount, or any emblematic award worth more than twenty-five dollars (\$25) for participating in athletic events, and that I have never competed under an assumed name.

- Student Conduct Code for Participants in Extracurricular Activities: Recognizing that participation in extracurricular activities is a privilege, the District requires that the conduct of student participants be exemplary at all times. Participants are representatives of the District and their school and must conduct themselves appropriately at all times. Student participants who violate this policy are subject to being removed from the activity in addition to any other applicable punishment.
- Student Suspension Policy: Any member of an athletic team found to be engaged/involved in smoking or other substance abuse/use will be subject to the procedure outlined in Board of Education Policy #5600: Student Rights and Responsibilities (Code of Conduct).

Parents and athletes are reminded that your reaction to the coaching staff, as well as other aspects of the athletic program are helpful to us. Should you choose to send us your perceptions, please mail them to either:

Mr. Tom Flynn, Athletic Director
Groves High School
20500 West 13 Mile Rd.
Beverly Hills, MI 48025

Mr. Aaron Frank, Athletic Director
Seaholm High School
2436 West Lincoln
Birmingham, MI 48009

I FULLY UNDERSTAND AND APPRECIATE THE RISK OF SERIOUS PERSONAL INJURIES ASSOCIATED WITH MY STUDENT'S PARTICIPATION IN INTERSCHOLASTIC ATHLETICS.

Signature of Parent/Guardian

Date

Signature of Student

Date