

Please name the sport(s) in which you plan to participate: _____



Birmingham Public Schools
Athletic Department

STUDENT ATHLETIC PARTICIPATION AND PARENTAL APPROVAL FORM
FOR MIDDLE, BCS, AND SENIOR HIGH SCHOOLS

Name of Student

School

Grade

Birthdate

Sex

I hereby give my consent for the above 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 the reverse side and am aware of the contents of the student suspension and sportsmanship policy.

I carry accident/health insurance. No Yes 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, the standard secondary school physical examination form must be completed and handed in prior to participation in any athletic activity.

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 fifteen dollars (\$15) 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 procedures 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:

Mr. Fred Procter
Athletic Director
Groves High School
20500 West 13 Mile Road
Beverly Hills, MI 48025

Mr. Douglas Fraser
Athletic Director
Seaholm High School
2436 West Lincoln Road
Birmingham, MI 48009

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

_____ Date _____

_____ Signature of Student _____

_____ Date _____

_____ Signature of Parent/Guardian _____