



2011 Summer Athletics Enrollment Application



Student Name: _____ Date of Birth: _____ Age: _____

Address: _____ Home Phone: _____
Number & Street Name City Zip Code

School Last Attended: _____ School Attending Fall 2011: _____

Parent Name _____ Work Phone: _____ Cell Phone: _____

Parent Name _____ Work Phone: _____ Cell Phone: _____

If parent cannot be reached, contact: Name _____ Phone _____

<p>Please Identify Summer Program(s) You Wish to Enroll:</p> <p>Sport: _____ Coach: _____ Time: _____</p> <p>Sport: _____ Coach: _____ Time: _____</p> <p style="text-align: center;"><u>Cost for each program selected = \$75.00</u> <i>(Cheer & Var/JV Boys Basketball = \$150)</i></p> <p>*** Payment & Form Due to Main Office on/before 1st Day of Camp ***</p>	<p style="text-align: center;"><u>Office Use Only</u></p> <p>Total Classes Enrolled _____</p> <p>Fees Paid _____</p> <p>Initials of Approval _____</p>
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AUTHORIZATION TO PARTICIPATE AND RELEASE OF LIABILITY FORM

1. I certify that information given on this application is accurate. I have read and agree to abide by the California Interscholastic Federation (CIF) Student Athlete's Code of Ethics as well as the policies and procedures established by the Archdiocese of Los Angeles and Serra High School.
2. I understand that sports and athletics entail unknown and unanticipated risks, which could result in physical or emotional injury, paralysis, death, or damage to myself, property, or third parties. I understand that Serra HS has taken precautions to provide proper use and supervision but I acknowledge that all risks simply cannot be eliminated without jeopardizing the essential qualities of the activity. As a participant to this summer program I acknowledge that the risks may involve but are not limited to: being struck by another participant or ball, or all that may result in contusions, sprains, fractures, broken bones or concussions.
3. I hereby give my consent to my daughter/son to attend the Serra High School Summer Athletic Program and enroll in the program(s) for which a selection has been made. I agree to ensure that my son/daughter has access to a parent (i.e. home, work or cell phone) in case of emergency, class cancellation, campus evacuation, or any other non-planned event.
4. I understand and accept full academic and financial responsibility for selection(s) made on this application. Attending the summer practice session(s) do not guarantee a roster spot on athletic teams during the regular school year. There will be no grades or credit issued for the summer sessions.
5. I, the undersigned, hereby hold Serra High School harmless and waive any claim which may arise against Serra HS, including its officers, employees, agents, administrators, and volunteers from all liability arising out of or in connection with the summer practice sessions that may be filed on behalf of or for the above-named minor. For the purposes of this agreement, "liability" means all claims, demands, losses, causes of action, suits or judgments of any and every kind on account of any injury to the person or property of the above-named minor that occurs during the summer practice sessions.
6. In case of an accident, I give permission to take the above named minor to a physician. I hereby authorize the physician to take necessary care of my child and I agree to assume responsibility for all medical services.

Parent Signature _____ Date: _____