

ILSW 5th-8th Graders
Athletics Emergency Contact/Waiver Form

Name: _____ Grade: _____

Mom's Name: _____ Cell # _____

Dad's Name: _____ Cell # _____

Emergency Contact: (after mom & dad)

Name: _____ Cell # _____ Relation: _____

Name: _____ Cell # _____ Relation: _____

Person(s) that are authorized to pick-up my child from ILSW practices or sporting events are:

Name: _____ Cell # _____

Name: _____ Cell # _____

If your child is not picked up after practice he/she will go to aftercare, where fees will be applied

I, _____ the parents of _____ (child) give permission to him/her to participate in athletic activities with Immanuel Lutheran School Wentzville (ILSW). I hereby waive and release ILSW, the staff/volunteers from any and all liability to the above named minor. To the best of my knowledge he/she does not have any physical limitations, medical ailments, physical or mental disabilities that would limit or permit him/her from participating in athletic activities.

I am also aware that my child will need a **physical on file with the school to participate in athletics**. Kindergarten-4th graders need a school physical and **5th-8th graders will need the Missouri State High School Activity Association (MSHSAA) physical forms.**

Date of MSHSAA physical _____ (valid for one year from this date)

_____ Attached the **\$25 player fee** (cash or check to ILS)

_____ Student must maintain at least a 'C' average

_____ Parents will volunteer for at least 2 duties during the season

_____ Return uniforms in good condition (Replacement fee \$45 shirt/\$30 bottoms)

Parent Signature

Date