

Jim Elliot Christian High School
Sports Permission Slip
2010 - 2011

Dear Parents:

We are looking forward to starting a successful year -- learning to play as a team, having fun, and honoring God through our play
-- be it wins or losses.

Our after school program benefits us in a variety of ways:

- to be a Christian witness in the community
- to teach student responsibility and discipline
- to increase school spirit and pride
- to insure that student athletics remain "student first"

In order to be eligible to play, the following will be applied:

- Academics-- 1. **Must have and maintain** a GPA of 2.0. and no "F's" **Official grade check will be the prior quarter grades.**
2. Students not meeting this standard will be classified as ineligible until the next grading report is posted and the academic eligibility requirements are satisfied. Mid-quarter progress report is classified as a reporting period for reinstatement. During that probationary interim, the student may not participate in practices, games, special activities or team-squad travel.
- Attitude-- displaying Christian character traits in the classroom as well as at play.
- Ability-- listens to instruction and not instructs.

**Information to be turned into
School office before stepping
onto the game or practice field.**

- Permission slip**
- JECHS Emergency Medical Release Form**
- Sports Physical Form _____**
Date of physical
- Registration fee \$110.00 (only refundable if player is cut from the team)**
NO CHARGING SCHOOL ACCOUNT

Before signing your student up for any sport, please carefully consider all other after school commitments and obligations, which may possibly conflict with the sport you are trying out for. Also the transportation to and from practices. *Team members are expected to attend all practices and games.*

Jane Davis
Athletic Director

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Sport you are signing up for _____

Athlete's Name _____ sex _____

Current Grade: _____ Date of birth _____ Date of Physical _____

Phone # _____ Year playing this sport in High School
1st 2nd 3rd 4th
Circle one

My child, _____ has my permission to participate in the JECHS Fall Sports program.

Parents Names: _____
Please print

Date: _____

(Parent's Signature)

- Permission slip**
- JECHS Emergency Medical Release Form**
- Sports Physical Form** _____
Date of physical
- Registration fee \$110.00 (only refundable if player is cut from the team)**
NO CHARGING SCHOOL ACCOUNT

Transportation

Parents are responsible to make sure players are at the practices and games.

For Carpooling:

I am able to drive _____ players.

Note: Each child must have his / her own seat belt. Volunteer drivers must have proper licenses and be age 25 or older. All volunteer parent drivers must provide the school office a file copy of driver's license, proof of insurance and fill out the VOLUNTEER DRIVER APPLICATION FORM.