



Educating young minds for over 100 years!

Villa Maria Elementary School

2551 West 8th Street • Erie, PA 16505 • Phone 814-838-5451 • Fax 814-833-6132 •
www.vmelementary.com

AUTHORIZATION FOR ATHLETIC PARTICIPATION - VME STUDENTS

NAME _____ GRADE _____

ADDRESS _____ DATE OF BIRTH ____/____/____

CITY _____ STATE _____ ZIP _____ PHONE _____

I have read and fully understand the Villa Maria Elementary (VME") Athletic Guidelines and agree to abide by the principles and regulations contained therein. I also give my permission for the above athlete to participate in said sports.

I fully understand that VME does not provide any accident or health insurance coverage for my child while participating in interscholastic activities. I fully understand that it is my responsibility to provide insurance coverage for my child. I agree that in the case of injury I will apply our hospitalization and/or accident insurance toward payment of expenses incurred and will not look to the school or its representatives for any payment of the possible balance.

I further agree not to hold the school or anyone acting on its behalf responsible for any injury occurring to the above-named athlete in the proper course of such athletic practices, events, and related travel.

I hereby authorize the representative of VME to seek emergency treatment when indicated if I am not immediately available. I also authorize the selected physician/medical facility to perform any treatment deemed necessary in such an emergency situation.

I understand that any equipment or uniform that my child may receive from VME is on a loan basis. Said equipment or uniform must be returned in good condition or paid for by the undersigned. *

I understand that after two (2) unexcused absences from either practices or games, my child can be suspended from the team for up to one (1) competitive event for each further violation of this policy.

It is understood that the sports program will undertake at least two major fundraisers during the school year. These fundraisers are the lifeblood of our sports program. Each athlete is counted on to share the responsibility of helping these fundraisers succeed.

SIGNATURE _____ SPORT _____ DATE _____

A REGISTRATION FEE OF \$30 MUST ACCOMPANY THIS FORM FOR EACH SPORT YOUR CHILD PARTICIPATES IN. YOUR CHILD CANNOT PRATICE OR PLAY IN A SPORT IF YOU FAIL TO SUBMIT THIS AUTHORIZATION AND ATHE APPLICABLE FEE FOR EACH SPORT.

** A \$100 fee will be charged for any damaged or unreturned uniform. Your child will also not be able to participate in another sport until the uniform is returned or the fee is paid.*

CHECKS SHOULD BE MADE PAYABLE TO: VME ATHLETICS