



TRINITY
CHRISTIAN SCHOOL
A Classical and Christian Academy

Trinity Christian School Athletics Individual Player Waiver Form

All individual players' waivers MUST be submitted before participation.

League Type: (Circle)

Soccer: Boys K-5 Girls K-5 JV Boys JV Girls Varsity Boys Varsity Girls

Basketball: JV Boys Varsity Boys

Tennis: Boys Girls

Individual Player Information:

Player's Name: _____ Gender: (Circle) Male Female

Parent's Name: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Emergency Contact: _____ **Phone Number:** _____

Consent and Liability Waiver – Release of all claims (must be signed to participate)

I, _____ (parent/guardian), am the parent or legal guardian of _____ (minor child). As lawful consideration for my minor child being permitted to participate in sports at Trinity Christian School I agree that neither my minor child nor I will make claim against, sue, attach the property of Trinity Christian School, Trinity Presbyterian Church, their agents, sponsors, faculty, staff and owners of facilities in which they practice for damages for death, personal injury or property damage which my minor child may sustain as a result of my child's participation in these sporting activities. This release is intended to discharge in advance Trinity Christian School, Trinity Presbyterian Church, their agents, sponsors, faculty, staff and owners of facilities in which they practice from and against any and all liability, including for negligent actions, arising out of or connected in any way with any of my minor child's participation in Trinity Christian School sport except for liability that may arise out of willful or wanton misconduct by the school or its agents.

I attest that I am eighteen (18) years old or older and that my child is physically fit and has no known medical conditions which prohibit participation in this sport. My child and I agree to follow all laws, rules and guidelines regulating the conduct of the league, school and specific sport.

Parent's Signature: _____ **Date:** _____

Print Name: _____

Contact Information:

Name and Relationship to Child: _____ Phone # (H): _____
Phone # (W): _____ Phone # (C): _____
Family's Email Address: _____

Name and Relationship to Child: _____ Phone # (H): _____
Phone # (W): _____ Phone # (C): _____
Family's Email Address: _____

Emergency Information: Responsible adults to contact if parent/guardian cannot be reached:

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Child's Physician: _____ Phone #: _____

Physical Defects or Medical conditions: _____

Medications that your child is taking: _____

Please note specific allergies that your child has. _____

Consent for Medical Treatment: In the event that my child becomes ill or injured while under school supervision, I approve the school authorities to take the following steps:

- 1.) Contact a parent or legal guardian of the student and follow his/her instructions.
- 2.) In the event neither parent nor legal guardian can be reached immediately, the school authorities are hereby authorized to use their best judgment in contacting a properly licensed physician transporting my child by school provided transportation or, if the school deems wise, by ambulance, to the nearest hospital for consultation or treatment.

If, in the opinion of a properly licensed and practicing physician, my child needs medical or surgical services which require my consent before being supplied, and I cannot be reached, I hereby authorize, appoint, and empower the administration to furnish on my behalf such written or oral authorization as so may be required. Furthermore, I release the administration, Trinity Christian School, and Trinity Presbyterian Church from any liability which may arise from the giving of such authorization, it being my desire that my child be furnished with such medical or surgical services as soon as possible after the need arises.

Date: _____ Signature of Parents/Guardians: _____

Trinity Christian School admits students of any race, color, national and ethnic origin to all rights, privileges, programs, and activities made available to the students of the school. It does not discriminate on the basis of race, color, national and ethnic origin in the administration or its educational policies, admission policies, scholarships, athletics, or any other school administered programs.

Trinity Christian School is a ministry of Trinity Presbyterian Church

Revised 6/4/2018