

Parent Permission & Eligibility Information King's Junior and Senior High

Student's Name \_\_\_\_\_  
 (Last) (First) (Middle)

• **Transportation**

I hereby give my permission for my child to travel to the activities in transportation arranged and approved by King's Schools officials. I understand the students will be accompanied by proper school authorities and reasonable precautions will be observed.

• **Insurance**

Schools may carry a medical insurance coverage program for all students who participate in school approved activities. The policy limitations and provisions are highlighted in the Parent Handbook. This policy for current school year may include tackle football. For our records, the school needs to be advised of your medical insurance program which will provide coverage for your students. Parents are encouraged to have their own medical insurance program for their students.

• **Parent permission for activity participation and liability acknowledgement**

I hereby request that my child be permitted to participate in King's Schools Athletics. In considerations of such participation by my child, I hereby release and agree to hold harmless Crista Ministries and King's Schools, their directors, staff, officers and agents from any liability, claims judgments, amounts paid in settlement and expenses (including reasonable fees and costs of legal defense) for any injury, death, or damage to me and/or my child resulting from any risk, foreseen or unforeseen, whether or not caused in whole or in part by Crista's negligence, arising from any such athletic activity. I understand that the athletic activity in which my child will participate involves inherent risks, including, but not limited to, serious injury or death. I further understand that I have the option of choosing not to allow my child to participate in any or all of these activities by so indicating below, or the option to obtain medical coverage that would cover such activities.

• **Eligibility Information**

**I attest to the best of my knowledge my child meets the following criteria:**

1. Academic (meets minimum GPA and is not failing or has not failed any class within the last term).
2. Age and member (Meets the age requirements for level in school and is a member in regular attendance and in good standing at this King's schools).
3. Amateur Status (Is fully an amateur in good standing).
4. Physical Examination (Has on file a completed and current physical examination form).
5. Transfer Clearance (Transferring students must clear eligibility with the Athletic Director).

• **Athletic Code**

I have read and agree with the Athletic Code and understand the responsibility my child has accepted.

<u>Sport</u>	<u>Allowed</u>	<u>Not Allowed</u>
Cross Country	_____	_____
Football	_____	_____
Volleyball	_____	_____
Basketball	_____	_____

<u>Sport</u>	<u>Allowed</u>	<u>Not Allowed</u>
Golf	_____	_____
Track & Field	_____	_____
Cheerleading	_____	_____
Soccer	_____	_____

I hereby agree that all the above items are true and accurate according to the rules of the Washington Interscholastic Activities Association and this Eligibility Packet must be returned to King's Schools prior to participation in any scholastic activity or sport.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_