

# Dillon Christian School

## Athletic Agreement/Application For Participation

Participant's Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone number \_\_\_\_\_  
Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Athletic Fee (\$30.00) & Bus Fund (\$10.00) per Sport (excluding football) \$40.00 total (to be paid before the 1st scheduled game)

Football Fee \$100.00 (to be paid on or before August 1, 2008, includes participation fee & insurance)  
Method of payment: Cash\_\_\_\_\_ Check\_\_\_\_\_

This is to certify that \_\_\_\_\_ has my permission to participate in the sport circled below.

Soccer	Basketball	Softball	Baseball	Cheerleading
Cross-Country	Track	Volleyball	Football	Golf

\_\_\_\_\_ has my permission to participate in the DCS sports program. We have read and understand the philosophy of SCISA, the code of conduct for Dillon Christian School and SCISA, the DCS discipline policy, and eligibility rules, for DCS and SCISA and that participation may be withheld by the Administration, Athletic Director, Teacher, or Coach for any violations non-becoming to the student-athlete.

### Statement of Release:

With full knowledge of the sports program sponsored by Dillon Christian School through its athletic department; we, the undersigned by this agreement, release the school from any and all claims for any injuries received while the named applicant is engaged in the participation of sports activities, including the transportation to and from these activities. I further authorize any and all medical treatment for the player named and will be responsible for any and all such costs.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_