



**XAVIER HIGH SCHOOL ATHLETIC CODE OF CONDUCT
WIAA CONTRACT 2022-2023**

ATHLETE NAME: (print) _____ **YEAR:** (circle) FR SO JR SR

PARENT/GUARDIAN:

By signing this document, I (print name) _____ (parent/guardian)

indicate that I have knowledge, understanding, and agreement to these standards set forth for my son/daughter (circle) to be afforded the privilege of representing Xavier High School as a participant in athletics. I am also aware that any violation on the part of my child, to any of these standards, shall result in the consequences contained within this code of conduct. Also, I have received and understand the WIAA Rules of Eligibility.

Signature of Parent/Guardian

Date

STUDENT-ATHLETE:

By signing this document, I (print name) _____ indicate that I have knowledge, understanding, and agreement to these standards, set forth in order for me to be afforded the privilege of representing Xavier High School as a participant in athletics. I am also aware that any violation of these standards shall result in the consequences contained in this code of conduct. Also, I have received and understand the WIAA Rules of Eligibility.

Signature of Athlete

Date