

## 2022 7th/8th Grade Volleyball

Dear Parent/Guardian

The 2022 7th/8th Grade Middle School Volleyball season is fast approaching, and registration is now open. In order for your child to be registered for the upcoming volleyball season, they must have the following forms turned into your school's Activity Coordinator on or before the first day of practice. Those forms are:

- Completed Registration Form (See attached)
- Copy of payment from RevTrak (Link to RevTrak to make online payment: <https://bsd7.revtrak.net/>)
- Copy of current year's physical. (Must be dated after May 1, 2022 to be accepted)
- Copy of Concussion Acknowledgement Form

The 2022 season will start on August 29th and go through October 14, 2022. Practices will be held at your child's respective middle school each day, unless your child has a game scheduled. Practice times are typically 6:30 AM, 3:45 PM, or 5:15 PM and will be up to the individual coaches to set. All athletes should bring their own athletic shoes, water bottle, and if possible, knee pads.

If you need additional information please contact your middle school activities coordinator.



Danny Waldo  
SMS Activities Coordinator  
p. 406.548.4580  
e. [danny.waldo@bsd7.org](mailto:danny.waldo@bsd7.org)



Bryce Lingle  
CJMS Activities Coordinator  
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7th/8th Grade Volleyball

Please select your child's school : CJMS \_\_\_\_\_ SMS \_\_\_\_\_

STUDENT NAME (PRINT) \_\_\_\_\_

**SPORT PHYSICAL REQUIRED FOR 7TH/8TH GRADERS**

PARENTS/LEGAL  
GUARDIAN NAME (PRINT) \_\_\_\_\_

**BOZEMAN SCHOOL DISTRICT INTRAMURAL PARTICIPATION FORM**

**PLEASE READ CAREFULLY BEFORE SIGNING!!**

The Bozeman School District provides a wide range of interscholastic/intramural activities for both boys and girls. Participation in such activities is voluntary. The School District recognizes that participation in interscholastic /intramural activities can bring the student many rewards.

These activities require that the student make a commitment to the activity, submit to the discipline of the coach or advisor, and develop self-discipline to be able to successfully participate. Participation in these activities often requires considerable physical exertion, physical conditioning, and adherence to training rules and regimens.

The rewards for participation are obvious. Learning to function in a team effort teaches a student important lessons for life. Participation in individual sports teaches self-reliance and commitment. All such activities develop in the student an appreciation for his or her physical abilities and enthusiasm and school spirit. Competition is fun and everyone must learn how to deal with both victory and defeat.

Interscholastic/intramural activities tend to keep the student involved in a constructive endeavor. The District's experience has been that its athletes and members of other extra-curricular activities tend to be good citizens and good students. The District believes that you should encourage your child to participate in these activities and support and encourage him or her during the ups and downs of the particular endeavor.

\*The School District will provide supervisors, safe equipment and facilities, and make reasonable efforts to see that the interscholastic/intramural program is safe for your child. Nevertheless, because athletic activity can involve injury to the participants, we must warn you of such dangers.

\*Athletic injuries can impair the student's general physical and mental health, the student's ability to earn a living, engage in social or recreational activities and general enjoyment of life. Such injuries can include death or serious physical injury and a possibility of emotional injury. Injury can arise from training room procedures, the administration of first aid, or failure to follow game, training, safety or other team rules.

The purpose of this warning is to aid you in making an informed decision as to whether the student should participate in the intramural activity. Also, its purpose is to make you aware that as a student/athlete and parent or guardian, it is your responsibility to learn about the sport involved and to inquire of coaches, physicians and other knowledgeable persons about any concerns you might have regarding athletic safety and the School District's athletic program.

**INSURANCE IS REQUIRED AS NOTED ON REVERSE SIDE. WITHOUT INSURANCE THE ATHLETE WILL NOT PARTICIPATE IN INTRAMURAL SPORTS!!!!!!!**

I. **PARENTAL AUTHORITY FOR MEDICAL CARE** - We authorize Bozeman School District #7, the athletic trainer, and faculty members or coaches in charge of the student to obtain all necessary emergency medical care and authorize any licensed physician and/or medical personnel to render necessary emergency medical treatment to the athlete referenced under student signature.

II. **EMERGENCY INFORMATION** - In the event of an emergency, the following two people may be notified: (**Parents Information first**, then other if needed.)

1. NAME \_\_\_\_\_ Relation to Athlete \_\_\_\_\_

PHONE (work) \_\_\_\_\_ (home) \_\_\_\_\_ (cell) \_\_\_\_\_

2. NAME \_\_\_\_\_ Relation to Athlete \_\_\_\_\_

PHONE (work) \_\_\_\_\_ (home) \_\_\_\_\_ (cell) \_\_\_\_\_

III. **PHYSICIAN** - The name of the student's doctor is:

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

IV. Bozeman School District **DOES NOT** provide medical insurance benefits for students who choose to participate in the intramural programs. **Medical insurance MUST be provided in order for the student to participate.**

V. **VERIFICATION OF INSURANCE** - The athlete is covered with the following health insurance:

Name of Insurance Co. \_\_\_\_\_ Policy # \_\_\_\_\_

**ACKNOWLEDGMENT OF RISKS**

We have read the foregoing athletic participation form and the warning about the risks of injury or death. In consideration of the Bozeman School District's permitting my child or ward to participate in its athletic/intramural programs and to engage in all activities relating to the event, we recognize and assume the risks which are inherent in the sport.

**Student/Athlete's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

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

**Address** \_\_\_\_\_ **Zip** \_\_\_\_\_