

**TEWINKLE MIDDLE SCHOOL**

**Activity Certificate**

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Sport: \_\_\_\_\_  
Address: \_\_\_\_\_ Parent Email: \_\_\_\_\_  
Father's Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Mother's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**I. Parent or Guardian's Permission**

- I hereby give my consent for the above-named student to compete in the Newport-Mesa Unified School District's approved athletic program and travel with the school representative on necessary school trips. I realize that there is a risk of serious injury for participation in school sports and related activities.
- It is understood that the school district, the student body, and/or any of its employees are not financially responsible in the case of accident or injury.
- The undersigned agrees to be responsible for the safe return of all equipment issued by the school to the above-named student.

**II Consent For Emergency Treatment**

Please read carefully and check the following options:

- I hereby give permission to a physician to administer emergency treatment.  
YES \_\_\_\_\_ NO \_\_\_\_\_
- The team physician, trainer, and/or coach may apply first aid treatment until a doctor can be contacted if necessary.  
YES \_\_\_\_\_ NO \_\_\_\_\_
- I give consent for coaches, trainers, and/or team physicians to use their own judgment in securing medical aid and ambulance service in case parent(s) cannot be reached.  
YES \_\_\_\_\_ NO \_\_\_\_\_

In an emergency, if parents(s) cannot be contacted, please contact:

Name: \_\_\_\_\_ Day Phone: \_\_\_\_\_  
Doctor: \_\_\_\_\_ Day Phone: \_\_\_\_\_  
Preferred Hospital: \_\_\_\_\_ Allergies: \_\_\_\_\_

**III Insurance Certification**

I hereby certify that the above-named student is covered by accident insurance, which provides protection for accidental bodily injury, and/or accidental death as required by Ed. Code Sec. 32220-32221 for participation in approved school activities during the 2019-2020 school year. I understand that the above-named student will be permitted to participate in the District's activity program only upon my representation that insurance coverage as described in Section III is in effect for the present school year.

Policy Issued By: \_\_\_\_\_ Policy # \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

By signing, I acknowledge that I have read the above sections and that all information I have provided is true and accurate.

OVER ----->

TeWinkle Athletics

Dear Parent/Guardian;

We are pleased to have your son/daughter involved in the TeWinkle athletics program. TeWinkle offers a wide variety of athletic teams (boys and girls basketball, volleyball, soccer, and track). We know that students who participate in athletics have better attendance and statistically do better in school. The lessons learned on the field of play often carry over into success later in life.

Putting on a quality athletic program takes money. The school provides transportation to games, pays the coaches and game officials, maintains fields, purchases equipment, and provides uniforms for each athlete. Uniforms are used from year to year to save money so that more students have the opportunity to participate.

We are asking for parent/guardians to help us offset these costs. Any donations you could make to help support the Trojans athletic teams would be greatly appreciated. These donations would help us to update equipment and buy uniforms more often to benefit our students. If you have any questions, feel free to call me at any time.

Sincerely;

Tara Ross  
TeWinkle Middle School  
Athletic Director

Dr. Dipali Potnis  
TeWinkle Middle School  
Principal

Danny Valenzuela  
TeWinkle Middle School  
Assistant Principal

To support TeWinkle Athletic, detach this bottom portion and send a tax deductible check to TeWinkle Middle School, 3224 California Street Costa Mesa, CA 92626

Trojan Supporter ..... \$100.00

Cardinal Supporter ..... \$50.00

Gold Supporter ..... \$25.00

Other .....

Name: \_\_\_\_\_ Student's Name: \_\_\_\_\_

Address: \_\_\_\_\_

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