

CPS MIDDLE SCHOOL ATHLETIC COMMITMENT FORM

PARTICIPANT'S NAME (*PRINT*) _____ SCHOOL YEAR _____

PLEASE LIST ALL ACTIVITIES OR SPORTS on line below:

Prior to participating in any practice or tryout sessions for any interscholastic sport, each athlete must:

- Successfully pass a physical examination by a registered physician or other authorized health care provider, and the copy of such examination must be on file in the office of the building athletic director. The physical exam is valid for two years (730 days).
- Return the Activity/Athletic Commitment Form properly signed.
- Verify that the student is covered by a healthcare insurance coverage or a healthcare expense payment plan.
- Have parent and student signature.

As a school's student-athlete participating voluntarily in interscholastic athletics, I verify that:

1. I have reviewed the information and understand what the CPS School District expects from me in regards to sportsmanship, citizenship, scholastics, and staying free from drug/alcohol/tobacco use while enrolled in this school. I understand the consequences for breaking school policy, and I will not do so while a CPS School District student participant. **I understand that this is a year-round commitment.** I will be responsible for all equipment issued to me throughout the season, will return such equipment at the conclusion of the season, and will pay the current replacement cost for any of the equipment not accounted for by me at the end of the season.
2. I acknowledge that I have been properly advised, cautioned, and warned by administrative and coaching personnel of the school district that I am exposing myself to the risk of injury, including but not limited to, the risk of sprains, fractures, ligament and/or cartilage damage which could result in a temporary or permanent, partial, or complete impairment in the use of my limbs; brain damage; paralysis; or even death. Having been so cautioned and warned, it is still my desire to participate in sports and to do so with full knowledge and understanding of the risk of injury.
3. I, along with my parents/guardians, certify that I have reviewed, understand, and will follow all of the school district policies in the activity/athletic handbook. In order to be eligible for participation, I understand I must comply with all requirements listed.

CPS Citizenship Violation Consequences. Non-credible citizenship may result in disciplinary action. These actions may include parental contact, one-on-one conferences, extra athletic conditioning, benching, non-participation in interscholastic games, and/or a percentage of the interscholastic season withheld. Ultimately, removal from participation and/or the team can occur. A student shall not be considered eligible while under suspension.

Student Signature _____ Date _____

As a parent/guardian of a student participating voluntarily in interscholastic athletics/activities, I have reviewed the information, discussed it with my child, and will support the school in its efforts to promote good citizenship.

Parent Signature _____ Date _____

****Please note: Coaches or sponsors may have additional policies other than what is listed in the handbook and will provide information to each student/athlete and parent.**