



St. Rose of Lima



ACADEMIC POLICY

We feel the first priority of our students should be academic effort and to that we propose:

Students who receive an "F" on a report card grade, in an academic subject (all subjects except Art, PE, and Music) may not participate in St. Rose Sports games or cheerleading until such grade is improved upon to a grade of "D" or better.

Fourth quarter grades will be reviewed the following year to determine if academic difficulties exist.

The Sports Committee will contact the coaches about suspended students.

Parents and guests may visit our website at www.fastdir.com/strose. Once on the website, you will look for *bulletin/calendar* on the left-hand side of the page. Once you click this, you will be taken to a webpage that list all of the teachers and other associated bulletin boards.

Look for the bulletin labeled *Raider Review*. On the Raiders website you will find a link for directions to all schools, fields, and venues. You will also find our team schedules with dates, times, and site of contests.

Also practice schedules, cancellation of practice and/or games will be posted on this site.

You do not need a password to visit the *Raider Review* bulletin board.

I agree to abide by the academic policy. Please print name.

Student Signature

Parent Signature

*St. Rose of Lima Sports
Registration Form*

Basketball ___ Soccer ___ Volleyball ___ Cheerleading ___

Personal Information

Last Name _____ First Name _____ MI _____

Street _____ City _____ Zip _____

Phone _____ Email _____

Sex ___ Date of Birth _____ Age ___ Grade _____

Father's Name _____ Mother's Name _____

Would You like to Coach or Assist? Yes ___ No ___

Emergency Information

Player's Physician _____ Phone _____

Insurance Co. _____ Group # _____

ID # _____

Allergies _____

Other Medical Conditions _____

In Case of Emergency Contacts:

Name _____ Phone _____

Relation _____

Sports Fee

This fee covers Sports Operations and Incidental Expenses as outlined in the annual financial statement. This fee does Not cover any other expenses.

Single Sport: 1 child--\$25 2 children--\$40 More than 2--\$40

Multiple Sports--\$40 Total per Family

Commitment

I understand it takes the efforts of many at St. Rose for our Sports Program and participating sports to be successful. I pledge to do my part, to help, participate and conduct myself in a Christian manner at all practices and games.

Signature



*St. Rose of Lima
Sports Medical Release Form*

Player Name _____ Age _____

Address _____ City _____ Zip _____

Parent/Guardian _____

Home Phone _____ Work Phone _____

Emergency Contact: _____ Phone _____

Relationship: _____

Childs' Doctor _____ Phone: _____

Insurance Co: _____ Plan# _____

Known Allergies: _____ Medications: _____

Medical Release Statement:

I hereby permit my child to participate in the St. Rose of Lima sports program. I understand and fully accept that there are risks involved in sports and that accidents and injuries are common and are ordinary occurrences of sports.

In case of medical emergency, I hereby give permission to St. Rose staff and volunteer coaches to order treatment for my child. This includes any necessary medical treatment and x-rays. Of course, I understand that every attempt will be made to reach me by phone when a diagnosis is completed. I also understand that all related medical costs are my responsibility.

Parent or Guardian Signature

Date