

Church League Basketball 2017-2018 Parental Permission, Release, & Eligibility Form

***Return to SIJ RE Office by March 25, 2017**

I, _____, give my teen, _____ grade _____
(name of parent/guardian) (name of teen)

permission to play for a Church League Basketball team. I am aware that games will be played PRIMARILY on Saturday nights from December through March at one of several possible locations (SUCH AS ..SJC gym). I understand that there are inherent risks in participation in sports (including the possibility of death) which may either directly or indirectly befall my teen while participating in the above mentioned league, or while on property of the following indemnities: St. Francis gym, The Western Springs Recreation Center gym, Congress Park Elementary School Gym, LaGrange Christian Assembly Gym, St. Isaac Jogues Gym). In giving my permission, I hereby agree to RELEASE, INDEMNIFY, AND HOLD HARMLESS St. John of the Cross Parish, St. Cletus Parish, St. Francis Xavier Parish, Western Springs Recreation Center, Park District of La Grange, Congress Park Elementary School and Elementary District 102, Davis Memorial A.M.E. Church, First Congregational Church of LaGrange, First Congregational Church of Western Springs, Grace Lutheran Church of LaGrange, LaGrange Christian Assembly, St. Isaac Jogues, and any facilities or churches added to this list, their employees & agents, the Archdiocese of Chicago, the Catholic Bishop of Chicago (a Corporate Sole), and the Diocese of Joliet from ANY and ALL liability which may arise from my teen's participation in the above mentioned league. Liability to extend to any accidents, illnesses or injuries,

St. Isaac Jogues parish will not be providing any transportation to games or practices. Parent/guardians are responsible for their own transportation arrangements

In the event that my teen shall become a discipline problem during practices or games, I realize that such behavior will not be tolerated and could result in my teen being asked to leave the team. In the event that my teen shall be found to be in the possession and/or usage of alcohol and/or other drugs, I realize that I will be notified, and that my teen may/will be subject to dismissal from team and subject to any & all applicable laws of the State of Illinois regarding such matters. I understand that all participants are expected to demonstrate common courtesy and respect at all times, plus take good care of facility property & equipment. I understand the following: inappropriate language/behavior will not be tolerated; socializing should be done in public areas; smoking is not permitted; and weapons are prohibited.

In the event that a medical emergency shall befall my teen and immediate attention is required, I now provide his Church League coach the ACTING POWER OF ATTORNEY, to initiate and oversee any emergency medical care that may be deemed necessary on my teen's behalf, until such time when I may be present to authorize the same. To assist in the administration of such care, I now provide insurance & medical information which may be necessary:

Insurance Company _____ Policy # _____

Policy in Name of: _____

Allergies/medical conditions/medicines: _____

Hospital Preference: _____ Dr. _____

Please make the following contact in the order indicated (by number in parentheses) when an emergency arises:

() contact father _____ phone # () contact mother _____ phone #

() other _____ phone #

I acknowledge the importance of this CHURCH League as a place of Christian fellowship between players, coaches, and spectators and I will do my best to uphold these values.

By placing my signature, I hereby attest that I have read, understand, and agree to ALL of the above provisions.

(Signature of parent/guardian)

Date

Phone # _____

Address: _____

Cell phone # _____

Email address _____

T-Shirt Size _____