ST. MONICA ACADEMY ATHLETICS PARENT INFORMATIONAL PACKET

Dear Parents,

At St. Monica Academy, athletics serve a vital purpose within our goal of developing the whole person: mind, body, and soul. Membership on a team builds a special camaraderie between fellow athletes and demands that each member work towards the team's shared goals. Athletic training requires physical discipline and mental toughness. Striving for honorable victory on the field, court, or track leads to a desire for excellence, while accepting defeat with grace demonstrates a spirit of humility. It is our hope that St. Monica Academy students develop these virtues when they join an athletic team.

In addition to these lofty goals which we expect our students pursue with dedication, this athletic packet letter includes information on our athletic offerings, parent responsibilities, and necessary release forms which will enable your student to be a member of a sports team during the year.

Seasonal Sports:

7th-8th Grade Fall Sports: Girls A Volleyball and Boys A Flag Football 5th-6th Grade Fall Sports: Girls B Volleyball and Boys B Flag Football.

7th-8th Grade Winter Sports: Girls A Basketball and Boys A Basketball 5th-6th Grade Winter Sports: Girls B Basketball and Boys B Basketball

5th-8th grade approach:

A heavy emphasis within our $5^{th}-8^{th}$ grade level sports is placed upon learning how to play the various sports. Players will only have to "make the cut" if the number of students exceeds the maximum that a coach can effectively work with. Coaches at the $5^{th}-8^{th}$ level should strive to get each team member some meaningful playing time throughout the season. That being said, part of the joy of sports is to compete for victory. Coaches are not expected to make no attempt to win, or to make substitutions with no regard for the state of the particular contest, but the competitive drive must be balanced with the need to teach every member of the team to play the respective sport as well as he or she can. Missed practices and/or poor behavior will diminish a student's playing time.

General Athletic Requirements:

- ^(b) Students must maintain at least 2.0 GPA.
- ③ Students must attend practices. Practice schedules are set by the coaches, and students will not play if they miss regularly or without informing the coach.
- There is a fee for every sport. The fee amount *partially* offsets the cost of referees, gym and field rentals, equipment, and uniforms. The fee is \$50 per student for each individual sport.
- ③ Athletic Director for 5th-8th Grade: Mr. David Curtin <u>curtind@stmonicaacademy.com</u>

CYO ATHLETICS

AGREEMENT AND RELEASE OF LIABILITY (With consent of Parent or Guardian of Minor)

| DATE | | | | | | |
|---|------------------|--------------------|--|--|--|--|
| NAME OF PARENT(S)/GUARDIAN(S) | | | | | | |
| NAME OF PLAYER | | PHONE | | | | |
| ADDRESS | ZIP | DATE OF BIRTH | | | | |
| PARISH/SCHOOL: <u>St. Monica Academy</u> GRADESCHOOL YEAR | | | | | | |
| PLEASE INDICATE SPORT: | Girls Volleyball | Boys Flag Football | | | | |
| | | | | | | |

Girls Basketball

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Boys Basketball

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I acknowledge that participating in the sports of basketball, baseball, football, softball, track and volleyball (the "Sports") can be dangerous activities involving many risks of injury. I further acknowledge that Catholic Youth Sports Organization, Inc. (the "CYO") is a non-profit corporation formed to advance league play of the Sports, the efforts of which directly benefit me. I, in consideration of the acceptance of me by the CYO as a participant in a sports league release and forever discharge any and all liabilities, claims, losses, demands, costs, expenses, or rights of action, of whatever kind or nature, which I have or which may hereafter accrue to me against the CYO, the parish/school listed above, or their respective trustees, officers, employees, coaches, agents, administrators, members, sponsors, promoters or affiliates, arising from or by reason of any bodily or personal injury or property damage which may be sustained by me directly or indirectly in connection with my participation in any of the Sports during or following the above school year. I agree, for myself and successors, that this Agreement and Release of Liability contains the entire agreement between myself and the CYO and that the terms hereof are contractual and not a mere recital. I currently have no known physical or mental condition that would impair my capability for full participation as intended and expected of me (except for

SIGNATURE OF STUDENT: ____ DATE

PARENT OR GUARDIAN OF A MINOR: I, as parent or guardian of the Student, represent to the CYO that the facts herein concerning my child or ward are true. I hereby give my permission for my child or ward to participate in the Sports during the above school year, and further agree, individually and on behalf on my child or ward, to the terms of the above Agreement and Release of Liability.

| SIGNATURE OF PARENT OR GUARDIAN | DATE |
|---------------------------------|------|
| | |

(Fill out back side as well)

ST. MONICA ACADEMY MEDICAL RELEASE

Our permission is hereby given to the representative of the school to authorize, by his/her signature whatever medical or surgical treatment may be considered necessary or advisable by the physician or nurse in attendance in the event of an accident or medication emergency involving:

Please print

| Student's name | | | |
|------------------------------|-------------------------|----------------------|-----|
| Birth date | Place of birth (city/st | ate) | |
| Address | | City | Zip |
| Parent/Guardian name | | | |
| Home phone | | _ Cell phone | |
| Dad's work phone | | Mom's work phone | |
| Emergency contact (if parel | nts cannot be reached) | | |
| Phone | rela | ationship to student | |
| Insurance company | | Plan # | |
| Family physician | | Phone | |
| Allergies, reactions, medica | al conditions | | |
| | | | |