

Athletic Registration – North Mason School District

Student's Name (please print): _____ M _____ F _____

Grade in School: _____ Date of Birth: _____

Parent/Guardian: _____ Phone: _____

Parent/Guardian Email: _____

ATHLETIC ELIGIBILITY

Please **ACCURATELY** answer the following questions pertaining to athletic eligibility. A parent/guardian/participant that provides the school with false information may result in the participant being declared ineligible from interscholastic competition for a period of one year.

- Yes _____ No _____ Student is under **20** years of age.
- Yes _____ No _____ Student resides within North Mason School District boundaries.
- Yes _____ No _____ Student was enrolled and in regular attendance the first 10 days of the current trimester.
- Yes _____ No _____ Student passed at least 4 classes during the previous grading period.
- Yes _____ No _____ Student is presently enrolled in the NM School District with a minimum of 5 full credit classes.
- Yes _____ No _____ Student is attending an alternative school other than NMHS -- *Running Start, PACE, Home schooled etc.?*
(Please fill out the appropriate WIAA form found online or in the Athletics Office)
- Yes _____ No _____ Student is a foreign exchange student? (Please fill out WIAA form found online or in Athletics Office).

PARENT/GUARDIAN SIGNATURE _____ **STUDENT SIGNATURE** _____

ACTIVITIES' CODE

We have read the ACTIVITIES' CODE (which can be found online or in the Athletics Office). We fully understand the following information including: mission statement, eligibility for participation, general regulations, athletic disciplinary action, and WIAA requirements. My student, whose name is printed above, meets all WIAA requirements.

PARENT/GUARDIAN SIGNATURE _____ **STUDENT SIGNATURE** _____

ASSUMPTION OF RISK/INFORMED CONSENT

Participation in athletics at Hawkins Middle School is a voluntary, extracurricular activity. Participation in any athletic activity can result in an injury of some type. The severity of such injury can range from minor cuts, scrapes, muscle strains, or broken bones, to catastrophic injury such as complete paralysis or even death. No amount of reasonable supervision or training can completely eliminate this possible risk. The purpose of this warning is to bring to your attention the existence of potential dangers associated with athletic participation and aid you in making an informed decision in allowing your student to participate in athletic activities. Inconsideration of the above warning and assumption of risk, I give permission for my student _____ to participate in the athletic program and to engage in all activities related to the team.

PARENT/GUARDIAN SIGNATURE _____ **STUDENT SIGNATURE** _____

We have read all of the forms mentioned above and understand them fully and will abide by all rules as stated.

PARENT/GUARDIAN SIGNATURE _____ **STUDENT SIGNATURE** _____

DATE _____ **DATE** _____