# 2012-2013 PITT COUNTY SCHOOLS Athletic Participation Form

STUDENT ATHLETE					PARENT PERMISSION				
N CC4									
Name of Student	τ: (Ι	Please Print)	Student	Parents 1	vame:	(Please Prin	t)		
Cala				Street Address:					
School:		Grade: St		Street Address:					
Date of Birth: Phone: Home:				City:		State & Zip	Pł	none: Home:	
Student Cel		t Cell:	Cell:			Code:		Work:	
								Cell:	
Request for Permission: We, the undersigned student and the student's parent/guardian, apply for permission to participate in									
interscholastic athletics in the following sports/areas:									
[ ] Base			[ ] Football			vimming		Wrestling	
[ ] Bask			[ ] Golf		[ ] Tennis		Wrestling Mat Maid		
[ ] Cheerleading			[ ] Soccer		[ ] Track [ ] Volleyball		Student Athletic Training		
	ss Country		Softball	.1				Student Team Manager	
<b>General Requirements:</b> We have read and discussed the general requirements for high school athletic eligibility. We understand that additional questions or specific circumstances should be directed to our student's coach, athletic director or principal.									
<b>Risk of Injury:</b> We acknowledge and understand that there is a risk of injury involved in athletic participation. We understand that the student-athlete will be under the supervision and direction of a PCS athletic coach. We agree to follow the rules of the sport and the									
instructions of the coach in order to reduce the risk of injury to the student and other athletes. However, we acknowledge and understand that neither the coach nor PCS can eliminate the risk of injury in sports. Injuries may and do occur. Sports injuries can be severe and in									
some cases may result in permanent disability or even death. We freely, knowingly, and willfully accept and assume the risk of injury that									
might occur from participation in athletics.									
<b>Release:</b> In consideration of PCS allowing the student-athlete to participate in athletics, we agree to release and hold PCS, its athletic									
coaches and other employees free, harmless and indemnified from and against any and all claims, suits or cases of action arising from or									
out of any injury that the student-athlete may suffer from participation in athletics other than an injury resulting from gross or willful									
negligence.									
Insurance: Pitt County Schools provides an All-Athletic Insurance policy. This is a secondary insurance policy. These limited benefits									
will be made available upon request.									
Check one: [									
Name of Other Insurance: Street Address:					Policy Term From:				
Street Address:				1	To:				
City:		State:	e: Zip:		Group Number:				
State. Zip.									
CERTIFICATION	ON AND MEDIC	CAL AUTHORI	ZATION: We	certify tha	t all of t	the information p	rovi	ded by us on this form is correct.	
We agree to abide by state and local rules. We give our consent for the student to receive a medical screening examination prior to									
participation in athletics. If the student-athlete is injured while participating in athletics and PCS is unable to contact the parent, we grant									
PCS permission and authority to obtain necessary medical care and/or treatment for the student's injury. Treatment may include, but is not									
limited to, first aid, CPR, and medical or surgical treatment recommended by a physician. We accept the financial responsibility for such									
medical care or treatment.									
Release of Medical Information:									
I also give my permission for the treating physician to release information to the athletic trainer/first responder and/or receive health-									
related information needed to care for my child with physicians, coaches, other healthcare providers, etc. throughout the school year.  We, the undersigned student and parent, have read this document and understand and agree to the expectations for athletic participation at									
Pitt County Schools.									
Student:			-		Date:				
Parent/Custodian:					ate:				
A M. C. M. C. M. C. M.					att.				

### **Athletic Pledge**

#### **Student Athlete Pledge**

As a student athlete, I am a role model. Using inappropriate language, taunting, baiting, or using unwarranted physical contact directed at opposing players, coaches, or fans is contrary to the spirit of fair play and the good sportsmanship that my school, my conference, and the North Carolina State Board of Education expect of their members. I accept my responsibility to model good sportsmanship that comes with being a student athlete.

#### **Parent Pledge**

As a parent, I am a role model. I will remember that school athletics are an extension of the classroom, offering learning experiences for the students. I will show respect for the opposing players, coaches, spectators and support groups. I will participate in cheers that support and uplift the teams involved. Using inappropriate language and taunting are contrary to the spirit of fair play and good sportsmanship that our school, our conference and the North Carolina State Board of Education expect of their members. I accept my responsibility to model good sportsmanship that comes with being the parent of a student athlete.

## **Affirmation of Domicile and Custody**

Only students who meet domicile and custody requirements are eligible to take part in interscholastic competition. Pitt County Schools requires that the following criteria be met:

**Domicile** –Student athletes must attend the school to which they are assigned by the Board of Education. All students, unless granted a transfer according to Board of Education Policy 10.104 or Policy 10.111, must attend their home school, which is the school in the attendance area where they are domiciled.

According to State Law, although a person may have more than one residence, he/she can have only one domicile. Under Pitt County Board of Education Policy 10.103, the domicile of an un-emancipated minor student is deemed to be that of his/her parent or court-ordered custodian. According to Pitt County Board of Education Policy 10.103, domicile is the location where the parent/custodian lives on a permanent or indefinite basis. One can establish a new domicile only by abandoning the current residence of domicile, with no intent to return to it. The entire family must make the change, taking household goods and furniture.

**Custody** – Student athletes must be domiciled in Pitt County with a parent, court-appointed custodian or court-appointed guardian or with a caretaker authorized to enroll the student under NCGS 115C-366 (a3) due to documented parental abandonment, abuse or neglect.

**Penalties** – If a student dresses for or participates in interscholastic competition in violation of the above requirements, the games in which the student took part will be forfeited. Further, the school could be required to forfeit post-season awards; be banned from taking part in contests for a year; and/or be assessed a penalty upon readmission.

If there is documented proof that a student and/or his/her parent or legal custodian have falsified the student's athletic eligibility, the student shall be dropped from the team for the remainder of the season and become ineligible to participate for 365 days.

**Parent/Legal Custodian Statement** – I have read and understand the above domicile and custody requirements for interscholastic competition in Pitt County Schools. I hereby certify that my son/daughter meets these criteria. I further note that it is my responsibility to complete another Domicile and Custody Form if my domicile changes during the academic year. I understand that if I sign this document falsely, I subject my child to the risk of being dropped from the team, and subject the school and the district to the risk of forfeiting games, championships and post-season revenues.

Parent/Custodian:	Date:
Student:	Date: