



GCA ATHLETIC REGISTRATION AND MEDICAL RELEASE FORM

(Please print legibly, complete both pages and mail to 2519 Woodruff Road, Simpsonville, SC 29681)

Today's Date _____ How did you hear about GCA Athletics? _____

Sport (Please check box) **Basketball:** MS Boys JV Boys

Full Name of Player: _____ Name goes by _____ SSN#: _____

Male Female Age _____ Date of Birth _____ Name of School or Co-op _____ Grade _____

Height _____ Size for Uniform (Check one) Youth L Adult Small Adult Medium Adult Large Adult XL
(We cannot guarantee your selected size, but will do the best we can).

Address: _____ City: _____ State/Zip _____

Parent/Legal Guardian Name(s): _____

Home Phone #: _____ Mobile Phone#(s) _____

E-Mail(s): _____

Father's work place: _____ Work # _____

Mother's work place: _____ Work # _____

Additional Emergency Contacts & Phone _____

Medical Information

Allergies or Drug Sensitivities _____

Medications being taken: _____

Restrictions on Activities _____

Date of last Tetanus Booster _____

Pertinent past medical history _____

Insurance Policy and I.D. # _____

Insured Name, place of employment & work # _____

Hospital preference (for non-emergency situations) _____

Primary Family Physician and phone# _____

FOR PLAYERS:

I, _____ agree to the following **Player Code of Conduct:**

- ❖ Players will obey their parents, coaches, assistant coaches and referees at GCA athletic events and while traveling to such events. Talking back, arguing, and undue familiarity with GCA coaches will not be tolerated.
- ❖ Players are expected to treat prayer with proper reverence. Jokes, songs, conversation or behavior that treat the Lord's name, character, or institutions with triviality are not permitted.
- ❖ Players will demonstrate honesty in all their dealings with one another and their coaches. Players will respect property and belongings of others.
- ❖ Players will play diligently striving to do their best at all times.
- ❖ Players will refrain from rough physical contact with other students such as hitting, punching, and tripping.
- ❖ The possession and use of drugs, alcohol, tobacco, or weapons of any sort is strictly forbidden on the school grounds, at any practice or game or while being transported to a practice or game.
- ❖ Players will refrain from language and actions which are vulgar, inappropriate and demeaning to either God or mankind. Inappropriate teasing, criticizing, put-downs, insults and name-calling are not permitted.
- ❖ Players will refrain from all forms of inappropriate sexual behavior. Public displays of affection (e.g. holding hands, kissing, etc.) at any GCA athletic event are not permitted.
- ❖ Players represent GCA when in public and as such will wear GCA-issued uniform in appropriate manner before, during, and after athletic events. Players will take good care of uniforms turning them in at the end of the season and will not wear them to any non-GCA event. **Loss of uniform will result in a \$50 charge.**
- ❖ Male players will not wear any jewelry and female players will not wear any jewelry except for stud earrings to any GCA athletic event.
- ❖ Players will abide by the same hair guidelines that GCA students must abide by. Specifically hair is to be of natural, human color. Young ladies' hair should be kept off the face with simple hair accessories. Young men's hair is to be neatly trimmed. The top of the eyebrows, top of the collar, and lower half of the ear must be visible.

Signature of Player _____

Date _____

FOR PARENTS:

We, the undersigned parents or legal guardians of _____, a minor, do hereby release authorization and permission is given to Greenville Classical Academy (GCA) to furnish any necessary transportation, food, and lodging for this participant. The undersigned further hereby agrees to hold harmless and indemnify GCA, its directors, employees, and agents, for any liability sustained by said organization as the result of the negligent, willful or intentional acts of said participant, including expenses incurred attendant thereto. In the event of an emergency, I hereby authorize an adult leader of the organization, as an agent for me, to consent to an X-ray examination, emergency transportation, medical, dental, surgical diagnosis, treatment, or hospital care advised and supervised by a physician, surgeon, or dentist, (as appropriate) licensed to practice under the laws of the state where the services are rendered, either at a doctor's office or in any hospital. We further assume responsibility for the decision so made and the emergency care or treatment so secured for our child. We understand that, given proper time and circumstances, we will be notified by phone as soon as possible when treatment is needed or secured. Furthermore, should it be necessary for the participant to return home due to medical reasons, disciplinary action or otherwise, we assume all transportation costs involved. I give permission to have my child photographed during games or practices for use on the GCA website, GCA Athletics blog, newsletter, or other media.

We further agree to the following **Parent Code of Conduct:**

- ❖ I will not bring alcohol or illegal drugs to any games or practices.
- ❖ I will not use profanity around players, fans or officials.
- ❖ I will not address the referee during the game, the only exception being to point out emergencies or safety issues. (After the completion of the game, I may politely ask for the referee to explain the rules surrounding the call made during the game.)
- ❖ I will encourage good sportsmanship by demonstrating positive support for all players, coaches and officials.
- ❖ I will treat all players, coaches and fans and official with respect.
- ❖ I will encourage fair play.
- ❖ I will volunteer to assist the coach and team as needed (i.e. let others players carpool with me to the game, work in Admissions or Concessions for home games, clean up trash on the field or gym after a game, etc.)

I understand that GCA Athletics are primarily for GCA full-time students and GCA Home School Alliance students. In the event that GCA cannot field a team with GCA students, GCA will open up sign-ups to home-schooled students. I agree that my child is either enrolled full-time or part-time at GCA or is home-schooled. I understand that if the Player Code of Conduct or Parent Code of Conduct is violated, the player may be asked to not participate in GCA Athletics. **I understand that no refunds are given after the first official practice of the season.**

Signatures of Custodial Parents or Legal Guardians:

Mother _____ Date: _____

Father _____ Date: _____