

Sign-Up & Parental Permission/Waiver Form

I am aware of the Rules and Regulations and understand the responsibilities and privileges of being an Oak Park High School Athlete and to participate in extracurricular activities. I agree that I will at all times abide by those rules as long as I am a member of the team or organization. I promise to uphold the high standards of the team and will always be a credit to my school. I realize that failure to comply with these rules can mean my dismissal from the team or organization.

has shown a desire to become a member of one of our organizations or teams in the Oak Park School District. If selected, there are certain responsibilities and obligations which must be assumed in order to remain a member of the organization. I am aware of the rules and regulations, and understand my obligation to encourage our child to accept the responsibility, commitment, and pride which are the foundations of the program. I will see that the rules and regulations are carried out. I will whenever questions arise contact the coach for clarification. While I expect the school authorities to exercise reasonable precaution to avoid injury, I UNDERSTAND THAT THE SCHOOL/OAK PARK SCHOOL DISTRICT ASSUMES NO FINANCIAL OBLIGATION FOR ANY INJURY THAT MAY OCCUR.

In case of emergency, Dr	may be called at I	
thereby give	permission to tryout and/or take part in extracurricular	
activities in the Oak Park Sc	hool District.	

Candidates Signature: _____ Parent Signature: _____

Student/Player Name:		Date:	
Address:	City:	Zip Code	
Current Grade:	Birth Date:	Last Report Card GPA:	
Phone #:	Emergency Contact#:		
	LIST ANY CURREI	NT MEDICAL CONDITIONS OR	
MEDICATIONS:			

PLEASE TURN THIS FORM IN TO YOUR COACH/SPONSOR OF THE TEAM OR ORGANIZATION