Athlos Academy Titans

Boys and Girls Titan Basketball

NOTICE: Parents and Guardians of students 5th, 6th, 7th and 8th grade

Student Fees: $25

Athlos Academy of St. Cloud is offering boys and girls basketball open to all 5th, 6th, 7th, & 8th grade students. This program will begin **Wednesday, January 27th** and end in March (date to be determined soon). There will be a more definitive calendar handed out once games are scheduled and finalized. Practices will be held from **3:30-5:00 Monday, Wednesday, Friday.**

The purpose of Middle school sports is (1) to have students develop their sport skills by participating in basketball in a competitive team environment, and (2) answer to each student's need for fun and vigorous activity.

Students who are planning to participate in afterschool sports MUST have a physical done and all participation and sports physical forms turned into the school before they may practice or participate in games. Sport physical forms can be obtained through the students family doctor.

Must have equipment:

- Basketball Shoes
- Water bottle
- Athletic clothing
- Face covering

All activities will be under the supervision of the Athletic performance coaches, sport coaches, teachers and staff of Athlos schools.

Cancellations will be announced Via School Email

Contact or if you have any questions: Amanda Lindsay or Aaron Schwenzfeier

Email: lindsayamanda211@gmail.com or aschwenzfeier@athlosstcloud.org

PLEASE RETURN THIS FORM

Athlos Academy St. Cloud Basketball

I agree to provide transportation for my child to the school at by 3:30 and home after the program has ended immediately at 5:00 Monday-Wednesday-Friday so that he/she may participate in Titan Basketball Program.

In consideration for being permitted by Athlos Academy St. Cloud to participate in the above activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance Athlos Academy St. Cloud (its officers, employees, volunteers, and agents) from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activity.

PARENTAL CONSENT: (To be completed and signed by parent/guardian) I hereby additionally consent that my son/daughter, _____, may participate in the above activity and I hereby execute the above Agreement, Waiver, and Release on his/her behalf. I state that said minor is physically able to participate in said activity. I hereby agree to indemnify and hold the persons and entities mentioned above free and harmless from any loss, liability, damage, cost, or expense which they may incur as a result of the death or any injury or property damage that said minor may sustain while participating in said activity. I have carefully read this Agreement, Waiver, and Release and fully understand its contents. I am aware that this is a release of liability and a contract between myself and Athlos Academy St. Cloud and I sign it of my free will. I further understand that no medical insurance is provided.

Child's Name:_____Gender:_____Grade:_____

Teacher:_____

Parent/Guardian (Print):_____

Parent's/Guardian Signature:_____

Home Phone:_____Work Phone:_____

Emergency Contact Person:_____ Phone:_____