## ST. JOHNS COUNTY SCHOOL DISTRICT ELEMENTARY AND MIDDLE SCHOOL SPORTS PHYSICAL LIABILITY WAIVER FORM

(For Extracurricular Sport Tryouts Only)

Student Name:	School:	Grade:
Parent/Guardian Name:		Contact
Phone:	B 44 44	
This application to compete and/or participate in after or with the understanding that I/my student must adhere to	r before school activities is entirely voluntary of oall regulations therein.	n my/my student's part; and is made
Athletic Requirements		
Participation on an athletic team is a privilege that carries and dedication, setting a high standard for the entire school example both on and off the field. Athletes must adhere to both their school and themselves.	ool community. At St. Johns County School Dist	rict, we emphasize leadership by
To participate in sports at a St. Johns County School Distri	ict school, student-athletes must meet the follo	wing requirements:
<ul> <li>Physical Examination:         A current sports physical, dated no earlier than 1 game. It is recommended that students submit a for use in other sports throughout the school ye season.     </li> </ul>	a copy rather than the original physical form. O	riginal documents should be retained
<ul> <li>Academic Eligibility:         Students must maintain a minimum GPA of 2.0. of 2.0 or higher and are passing all classes. It is t eligibility status.     </li> </ul>		
Disciplinary Action:		
In order to participate in extracurricular activitie rules and applicable law. It is important for stud can extend beyond the classroom and school cal administration may restrict a student's extracurr and/or disciplinary action administered under Seare in the best interest of the student or the sch	lents to understand that the behavioral expecta mpus. Participation in extracurricular activities ricular activity privileges in connection with poo ection 4, or when in the judgment and discretio	tions placed upon them by the school is a privilege. The school rattendance, repeated tardiness,
<ul> <li>Attendance:</li> <li>On game days, athletes must attend at least half</li> </ul>	of the school day to be eligible to participate in	n that day's game.
Student Signature:		Date:
Parent/Guardian Signature:		
I hereby give my consent for the above-named student to activity. I understand that if there are pre-existing health to obtain, through a physician of its own choice, any med anyone acting on its behalf responsible for any injury occ	conditions, the school, county or coaches will a lical attention that may be reasonably necessar	not be held liable. I authorize the school
Parent/Guardian Signature:		Date:
I understand that transportation for the above-named students participating in after-school practices must arran below.		
Parent/Guardian Signature:		Date: