



## PLAYER/PARENT RESPONSIBILITY

- \_\_\_\_\_ **New Storm Participant:** An original or certified copy of your child's certificate of live birth must accompany this form. "Certified" means the copy was made by the recorder (county or state) and bears the original seal, stamp (in contrasting ink) etc. of the issuing office. Your child's proof of birth will be returned to you once your child has been certified by SJPAL. It is the **sole responsibility of the parent to collect** the certified copies of birth from WSJS after your child has been certified.
- \_\_\_\_\_ Your child must have a current (same calendar year) **PHYSICAL EXAMINATION** by a licensed physician. I/We understand that if a player/cheerleader has not had their physical examination, they will not be allowed to participate in any WSJS activities until the completed form is turned in.
- \_\_\_\_\_ The parent/guardian of the below named child does hereby give my/our approval for participation in the WSJS league, an affiliate of the San Jose Police Athletics League, for the current season. I/We assume all risks and hazards to this participation for any claim arising out of injury to the below named child, including, but not limited to, transportation to and from such activities I/We hereby waive release, absolve, indemnify and agree to hold harmless WSJS, its Board Members, Coaches, Participants, persons providing transportation, and San Jose Police Activities League.
- \_\_\_\_\_ I/We understand that our personal medical/dental insurance will remain the primary carrier of insurance and the insurance carried by this program is supplemental and secondary in nature.
- \_\_\_\_\_ I/We give approval for participation in all activities of West San Jose Storm. I/We assume all risk and hazards incidental to the program. In case of emergency I/We hereby authorize West San Jose Storm to pursue any necessary medical treatment. Parents need to notify participant's coach of any prior medical conditions (including severe allergies where an Epi-Pen may be necessary) or medications being taken (for example an inhaler for asthma).
- \_\_\_\_\_ I/We understand that a deposit of \$50 at the time of registration is non-refundable. There are no exceptions to this rule. Football and cheer registration fees are **due in full** by the first day of the season (usually in July). Registration fees are Non-Refundable after the first day of practice. **Your child will be unable to participate until all fees are paid in full and all required paperwork submitted.**

\_\_\_\_\_ **Cheer** uniform fees are **due in full** at the time of fitting. Please expect your child's uniform to be **upwards** of \$400, if they are a new participant and need all of the pieces. These uniforms are custom fitted to each girl's personal measurements and sizes.

\_\_\_\_\_ **Participation/Practice/Games/Attendance**

- Our regular practice schedule will be every day Monday-Friday- up until Labor Day, three days per week thereafter.
- To be eligible for play, participants must maintain a 2.0 grade point average at school. Verification of grades may be requested at any time.
- Please make sure your player/cheerleader is on time and ready to practice. If participants are going to be late or absent from practice please contact your head coach and let them know, Disciplinary action will be at the coach's discretion for participants who arrive late to practice.
- After Labor Day, if your player/cheerleader misses one day of practice they will sit out for 1 quarter for the next game. If participants miss 2 days of practice, they will sit out for 2 quarters. If they miss 3 days of practice they will sit out for the entire game. If your child is asked to sit out of the game for any amount of time they still need to attend the game and support their team. Participants who don't attend the game will be marked absent, Excessive tardiness or absences will result in disciplinary action up to and including dismissal from the team. Per PAL rules, cheerleaders can only miss 2 games before they are considered ineligible to participate in competition.

**I/We have read and fully understand the provisions of the responsibilities form and are voluntarily signing below.**

**Participant name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_