

Mundelein High School

2017-18 Athletic Clearance form

CLEARLY select (X) ONE sport per season that you intend to tryout for.

| | | | | | | | | |
|---------------|-------------------------------------|-------------------------------------|------------------------------------|--------------------------------------|---------------------------------------|-------------------------------------|-------------------------------------|--|
| Fall-Boys: | <input type="checkbox"/> X-Country | <input type="checkbox"/> Football | <input type="checkbox"/> Golf | <input type="checkbox"/> Soccer | | | | |
| Fall-Girls: | <input type="checkbox"/> X-Country | <input type="checkbox"/> Cheer CoEd | <input type="checkbox"/> Golf | <input type="checkbox"/> Pom/Dance | <input type="checkbox"/> Swim/Dive | <input type="checkbox"/> Tennis | <input type="checkbox"/> Volleyball | |
| Winter-Boys: | <input type="checkbox"/> Basketball | <input type="checkbox"/> Swim/Dive | <input type="checkbox"/> Wrestling | | | | | |
| Winter-Girls: | <input type="checkbox"/> Basketball | <input type="checkbox"/> Cheer CoEd | <input type="checkbox"/> Pom/Dance | <input type="checkbox"/> Gymnastics | <input type="checkbox"/> Winter Guard | | | |
| Spring-Boys: | <input type="checkbox"/> Baseball | <input type="checkbox"/> Gymnastics | <input type="checkbox"/> Lacrosse | <input type="checkbox"/> Tennis | <input type="checkbox"/> Track/Field | <input type="checkbox"/> Volleyball | <input type="checkbox"/> Water Polo | |
| Spring-Girls: | <input type="checkbox"/> Lacrosse | <input type="checkbox"/> Softball | <input type="checkbox"/> Soccer | <input type="checkbox"/> Track/Field | <input type="checkbox"/> Water Polo | | | |

Name: _____

Graduation YR: 2018 2019 2020 2021 (circle one)

Yes or No Transfer Student: List Previous High School _____

The success of the MHS Athletic Program depends on the cooperation of the athletes, the parents, and the Athletic Department. It is important that you read and understand the following statements. **MHS Code of Conduct Rules apply to All Athletes at All Times!**
 Falisfication of any information on this form is subject to disciplinary action under the MHS Athletic Code of Conduct.

ACADEMIC ELIGIBILITY PER ILLINOIS HIGH SCHOOL ASSOCIATION (IHSA)

To be eligible to compete on any Mundelein High School interscholastic athletic team, each athlete **MUST**:

- a) have passed a minimum of 2.5 units of credit the previous semester and
- b) Be enrolled in, attending, and passing courses that will generate 2.5 units of credit the current semester.
- c) Transfer students must have completed and approved **IHSA** transfer/residency forms on file in the Athletic Office **before** eligibility will be granted.

ATHLETIC ACCIDENT INSURANCE

Acknowledgement and Consent

Mundelein High School does not assume responsibility for medical/hospital expenses resulting from a student's injury while he/she participates in the MHS Athletic Programs. As Parent/Guardian we/I agree to bear full financial responsibility for the cost of any injury(s).

PARENT/GUARDIAN you must indicate what provision you are making for your student/athlete by checking at least one of the options below.

_____ We have purchased MHS Supplemental Student Accident Insurance.

_____ We have an insurance program (other than MHS Insurance) that will cover our Student/Athlete.

_____ **WAIVER:** We have no insurance & understand that we are responsible for any Medical/Hospital bills.

Date: _____ Parent/Guardian signature: _____

ATHLETIC CODE AND TRAINING POLICIES

Acknowledgement and Consent

By signing this form we acknowledge we have been provided information on the web regarding

Mundelein High School – Athletic Code of Conduct http://www.d120.org/assets/1/athletic_documents/Code_of_Conduct_2017-2018.pdf
 Concussion Information Sheet & IHSA Performance –Enhancing Substance Testing Policy
<http://www.ihsa.org/documents/sportsMedicine/current/Sports%20Medicine%20Consent%20and%20Acknowledgement.pdf>
 IHSA (hand only) CPR Training video <http://ihsa.org/Resources/SportsMedicine/CPRTraining.aspx>

I have read the Athletic Code of Conduct and will abide by the rules therein. I understand that failure to abide by these rules will result in sanctions by the coach and /or the athletic department. We are also acknowledging that we are providing consent to be tested in accordance with the procedures outlined in the IHSA Performance-Enhancing Testing Policy.

Date Athlete's Signature Parent/Guardian Signature