

Mundelein High School

2018-19 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 Co-Ed	<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"/> Bowling	<input type="checkbox"/> Swim/Dive	<input type="checkbox"/> Wrestling			
Winter-Girls:	<input type="checkbox"/> Basketball	<input type="checkbox"/> Bowling	<input type="checkbox"/> Cheer-Co-ed	<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: 2019 2020 2021 2022 (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! Falsification 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

In case my child needs emergency health care due to a sudden potentially serious illness or injury at school and it is impossible to contact me, I hereby give Mundelein High School personnel my permission to arrange for or provide such care as is deemed necessary. Athletic Activity can result in serious injury. Every Athlete must be aware of this fact and take every precaution to minimize the possibility of injury to yourself and others. In addition to preparing themselves for athletic competition, athletes must conform to instructions and regulations governing safety procedures.

Mundelein High School – Athletic Code of Conduct https://www.d120.org/assets/1/6/code_of_conduct_2017-2018.pdf

Concussion Information Sheet & IHSA Performance –Enhancing Substance Testing Policy

<http://ihsa.org/documents/sportsMedicine/current/Sports%20Medicine%20Consent%20and%20Acknowledgement.pdf>

IHSA (hand only) CPR Training video <http://ihsa.org/Resources/SportsMedicine/CPRTTraining.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