



Hope Lutheran School Athletics Registration Form

Please complete this form to sign up your child to participate in Hope's Athletic Program. One form can be used per family; please indicate the student's name and check the sport they are signing up for in the boxes below (please note the specific grade levels per sport). Except for Cheerleading and Dance Drill, there is a fee per sport that must accompany this form in order for your child to be registered, see the amount listed for the specific sport below. Fees vary depending on expenses per sport. You may submit a new form at the start of each season if you don't want to sign up for multiple sports at once. For further information about the Athletic Program, please consult the School Handbook or the school website. Team schedules may also be found on the website during the applicable season.

ATHLETIC TEAMS:	<i>(Student Name)</i>	<i>(Student Name)</i>	FEE:
Full Year Sports:			
7 th - 8 th Grade Cheerleading	<input type="checkbox"/>	<input type="checkbox"/>	N/A ^a
5 th - 8 th Grade Dance/Drill	<input type="checkbox"/>	<input type="checkbox"/>	N/A ^a
Fall Sports:			
5 th - 8 th Grade Cross-Country ^b	<input type="checkbox"/>	<input type="checkbox"/>	\$ 40
7 th - 8 th Grade Girls' Volleyball	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50
7 th - 8 th Grade Boys' Flag Football	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50
Winter Sports:			
7 th - 8 th Grade Girls' Basketball	<input type="checkbox"/>	<input type="checkbox"/>	\$ 60
7 th - 8 th Grade Boys' Basketball	<input type="checkbox"/>	<input type="checkbox"/>	\$ 60
5 th - 6 th Grade Girls' Basketball	<input type="checkbox"/>	<input type="checkbox"/>	\$ 40
5 th - 6 th Grade Boys' Basketball	<input type="checkbox"/>	<input type="checkbox"/>	\$ 40
Spring Sports:			
5 th - 8 th Grade Track	<input type="checkbox"/>	<input type="checkbox"/>	\$ 50
<i>Total Enclosed:</i>			\$
Valid Athletic physical evaluation on file with school? If "no," please submit before your child may participate. Physicals are valid for two years.	Y / N	Y / N	

ATHLETIC POLICY ACCEPTANCE:

Student:

I have read Hope's Athletic Policy and will, to the best of my ability, follow the policy.

Name: _____ /___/___ Name: _____ /___/___

Parent/Guardian:

I have read Hope's Athletic Policy and will, as a parent or guardian, follow and support the policy to the best of my ability.

Name: _____ /___/___ Name: _____ /___/___

Parent/Guardian/students: I read and understand the concussion safety information.

Name: _____ /___/___ Name: _____ /___/___

Name: _____	___/___/___	Name: _____	___/___/___
-------------	-------------	-------------	-------------

^a The Athletic Fee does not apply to these teams as they purchase their own uniforms and other out of pocket expenses.

^b Students may participate in Cross Country and either Volleyball or Flag football at the same time.