

PARTICIPATION ON A SECONDARY SCHOOL ATHLETIC TEAM

The purpose of this letter is to inform you that your child has joined a school athletic team for the _____ season. Your signature on the attached Consent Form confirms that you 1) are aware of the information provided in this letter, 2) acknowledge the inherent risks, and 3) give consent for your child to participate on athletic teams at _____ during this athletic season.

Athletic teams at this school participate in the Richmond Secondary Schools' Athletic Association league within the South Fraser Athletic Association zone. Competition includes league, exhibition, and tournaments within British Columbia that do not require overnight travel/accommodation.

Below is the information for this athletic season. Your child has been selected for: _____

FALL SPORTS (September to November)	WINTER SPORTS (November to March)	SPRING SPORTS (March to June)
Grade 8 Girls Volleyball \$50	Grade 8 Girls Basketball \$100	Grade 8 Boys Volleyball \$50
Grade 9/10 Girls Volleyball \$85	Grade 9/10 Girls Basketball \$150	Grade 9 Boys Volleyball \$50
Senior Girls Volleyball \$125	Senior Girls Basketball \$200	Girls Soccer (All Grades) \$40
Senior Boys Volleyball \$125	Grade 8 Boys Basketball \$100	Golf (Co-ed / All Grades) \$150
Cross Country (Co-ed / All Grades) \$15	Grade 9/10 Boys Basketball \$150	Grade 8 Badminton (Co-ed) \$45
Boys Soccer (All Grades) \$40	Senior Boys Basketball \$250	Junior Badminton (Co-ed / Gr 9/10) \$45
		Senior Badminton (Co-ed) \$45
		Senior Ultimate (Co-ed /All grades) \$20

All teams are supervised by a school employee or a community coach. This information, along with practice, game dates, times and location, can be found at _____. Please note that your child may not be directly supervised by an adult at all times while on this school athletic team. Please note that accidents can be the results of the nature of the activity and can occur with or without any fault on either the part of the student, or the school board or its employees or agents, or the facility where the activity is taking place. By allowing your child to participate on this athletic team, you are acknowledging these risks and give consent to your child to participate on school athletic teams.

We ask that you keep this letter at home and have your child return the completed and signed Consent Form to the coach no later than _____.

We require parent volunteer drivers to transport Student-Athletes to/from our away games and competitions. All parent volunteer drivers need to complete the SA-61 Driver Authorization Form for Volunteer and Staff; this Form is available from your coach/teacher sponsor or at the school office or the School District website www.sd38.bc.ca/parents. Thus, if you would like to be a parent volunteer driver, please complete the Form and return it to me, to get Principal approval, at least one week before the first game and no later than _____.

At the Grades 8-9 level, transportation to/from games and competitions is organized by the coach and/or teacher sponsor with the cooperation of parent volunteer drivers. Occasionally, teachers or coaches are able to drive Student Athletes. Some Student Athletes prefer to make their own transportation arrangements home at the end of games and competitions; if you accept this method of transportation, then please indicate this on the Consent Form.

If you have any questions about your child's participation on this school athletic team, please contact me. Thank you for your support!

Sincerely,

PARTICIPATION ON A SCHOOL ATHLETIC TEAM CONSENT FORM
ATHLETIC SEASON: _____

Child's Name: _____ **Grade:** _____ **Student #:** _____
(Secondary Students Only)

Athletic Team: _____

Athletic Season: Fall Winter Spring All 3 Seasons

Parent's/Guardian's Consent and Acknowledgement of Risk

My signature at the bottom of this form indicates my consent and acknowledgement of risk as well as my permission for my child to participate on this school athletic team.

- I accept responsibility for my child in Grades 8 and 9 to make transportation arrangements to away games and home at the end of away games and competitions. This may include transportation by volunteer drivers (including "N" status drivers), transportation by foot, or public transportation. All transportation arrangements will be checked by team coach or sponsor.
- I accept responsibility for my child in Grades 10-12 to make transportation arrangement to/from games and competitions. I will take responsibility to communicate and confirm with my child this method of transportation to/from games and competitions. This may include transportation by volunteer drivers (including "N" status drivers), transportation by foot or public transportation.
- I accept the risks/hazards inherent in the program/activity(ies) and understand and acknowledge that my child may be involved in an accident and may suffer personal and potentially serious injury arising from my child's participation on this athletic team.
- My child will abide by the District Code of Conduct (www.sd38.bc.ca/parents) as a member of this athletic team. This includes expectations, directions and instructions from the staff, administrators, and coaches. In the event my child fails to abide by these expectations, disciplinary action may include my child being excluded from further participation or that I be contacted to pick up my child (unless I have specified other transport arrangements); I will be responsible for any costs associated to send my child home.
- I acknowledge that it is my responsibility to inform the Athletic Director, Coach and Teacher Sponsor of any medical/health concerns that may affect my child's participation.
- I am aware that the School District provides optional student accident insurance coverage and parents will be able to purchase coverage, access claims forms and obtain full plan information online.
- I consent that the Board, through its employees, agents and officers, may secure such emergency medical services and advice as they deem necessary for my child's immediate health and safety, and that I shall be financially responsible for such services and advice.

Student Commitment to Safety, District Code of Conduct, Acknowledgement of Risk

- My signature at the bottom of this form indicates that I will commit to behaving safely and abide by the District Code of Conduct while I am on this school athletic team.
- I will participate on all athletic teams to the best of my abilities.
- I will behave safely and will wear appropriate clothing and use appropriate equipment while I am a member of this athletic team.
- I have been briefed by my Coach and/or Sponsor Teacher on the elements of risk and dangers involved and the precautions that are to be taken.
- I agree to the expectations set out by the Coach and/or Sponsor Teacher and supervisors and will abide by the District Code of Conduct and School rules as a member of the school's athletic team.
- I will report any safety, medical or health issue or injury to the Athletic Director, Coach, and Sponsor Teacher.

Richmond Secondary Schools' Athletic Association – Player Participation

I have read and understand that activities of this type expose the students participating to elements of risk and I have read and understand the above Discipline Rules and Regulations of the RSSAA, V&DIHSAA, and BCSS.

Athletic Department Policies

I have read, understand, and agree to the expectations set out in the following _____ documents: a) Richmond Secondary Schools' Athletic Association – Player Participation Consent For, b) BC School Sports Form: Student-Athlete Code of Conduct and Spectator's Code of Conduct, c) Philosophy and Policies, d) Athletic Fees, e) Uniform Care, f) Concussion Awareness, Response, and Management Protocol, g) Passenger List Form

Please Note: It is not necessary to return this form if you have consented online.

_____ Student's Name <i>(please print)</i>	_____ Student Signature	_____ Date <i>(year/month/day)</i>
_____ Parent's/Guardian's Name <i>(please print)</i>	_____ Signature	_____ Date <i>(year/month/day)</i>
	_____ Cell #	_____ Email
_____ Emergency Contact <i>(please print)</i>	_____ Cell #	_____ Relationship to child
Medical/physical conditions that may affect my child's participation on the field trip (allergies, recent illness or injury, recent hospitalization or surgery, chronic conditions, phobias, etc.) include (be specific): 		

参加中学校队函

本函旨在告知您的孩子已参加(年份)____季的校体育队。您在本函所附《同意表》上的签字，即确认 1)您知晓本函所提供的信息，2)知晓潜在风险，及 3) 同意您的孩子参加 _____ (学校名称) 此次体育赛季的体育队。

本校体育队参加列治文中学体育协会联赛。联赛由列治文 10 所中学和列治文基督教中学组成。

本同样赛季信息如下。您的孩子已被选入 _____ 队：

秋季赛 (9月-11月)	冬季赛 (11月-3月)	春季赛 (3月-6月)
8 年级女生排球 9 年级女生排球 10 年级女生排球 高年级女生排球 10 年级男生排球 高年级男生排球 游泳(男女生 / 所有年级) 越野跑(男女生 / 所有年级) 男生足球 (所有年级)	8 年级女生篮球 9 年级女生篮球 10 年级女生篮球 高年级女生篮球 8 年级男生篮球 9 年级男生篮球 10 年级男生篮球 高年级男生篮球 乒乓球(男女生 / 所有年级) 冰壶 (所有年级)	8 年级男生排球 9 年级男生排球 女生足球 (所有年级) 高尔夫(男女生 / 所有年级) 8 年级羽毛球(所有年级) 低年级羽毛球(男女生 / 9/10 年级) 高年级羽毛球(男女生) 网球(男女生 / 所有年级) 低年级飞碟争夺赛(男女生 / 8-10 年级) 高年级飞碟争夺赛(男女生)

所有运动队均由学校员工或社区教练监管。上述信息以及练习、比赛日期、时间和地点可在 _____ (与学校网站链接) 获得。请注意，您的孩子在参加校体育队活动过程中不会总有成年人监管。活动性质本身可能造成事故，而且无论活动进行时学生或学校局或其雇员或代理人或设施有无过失均能造成事故。您允许您的孩子参加此次运动队活动，您即接受事故发生的风险，且同意您的孩子参加校体育队活动。

我们请您在家中保留此函，并让您孩子在 _____ (日期) 之前交回填写完毕且签字的《同意表》。

我们需要家长志愿者司机为学生运动员提供往返练习及比赛场地的交通。所有家长志愿者司机需填写 SA-61 司机授权表 (SA-61 Driver Authorization Form)；教练/老师和学校办公室备有此表，或可在学校区网站 www.sd38.bc.ca/parents 下载。为此，如您愿做家长志愿者司机请填写此表，并至少在首次训练前一星期且不晚于__年__月__日交给我以便校长审批。

对 8-9 年级学生，在家长志愿者司机的配合下，往返于训练和比赛/友谊赛的交通由教练和/或负责老师安排。教师或教练偶尔也能开车接送学生运动员。有些学生运动员愿在练习和比赛结束后自行返家；如您接受该等自行返家方式，请在《同意表》中说明。

如您对孩子参加学校体育队有任何问题，请到学校与我联系。谢谢您的支持！
诚挚的，

体育总监姓名

参加学校体育队同意表
运动季: _____

孩子姓名: _____ 年级: _____ 学生号: _____
(仅限中学生使用)

体育队: _____

运动季: 秋 冬 春 所有三季

家长/监护人风险同意及认可

我在此表底部的签字表明我对风险的同意和认可，并许可我的孩子参与此次校队活动。

- 我同意负责为我 8-9 年级的孩子在练习和比赛结束后做出往返练习和比赛/友谊赛场地的交通安排。该等安排包括志愿者司机（“N”牌司机）提供的交通、步行或公共交通。所有交通安排均须体育队教练核查。
- 我同意负责为我 10-12 年级的孩子安排往返练习和比赛场地的交通。我负责与我孩子就往返练习及比赛场地的交通方式进行沟通与确认。该等交通方式包括志愿者司机（“N”牌司机）提供的交通、步行或公共交通。
- 我接受该等活动的潜在风险/危险，理解并认可我孩子可能会因其参与校队活动造成的事故及可能的人身和潜在的严重伤害。
- 作为校队队员，我孩子将遵守《学区行为守则》(www.sd38.bc.ca/parents)，包括学校职员、管理人员与教练提出的要求、指导和说明。如我的孩子未能遵守该等要求指导和说明，惩戒处分可能包括我的孩子不能继续参加活动或我被告知接回孩子（除非我已做出其它的接回安排），而且我将负责与送孩子回家的任何相关费用。
- 我同意，我有责任将可能影响我孩子参加活动的医疗/健康事项告知老师。我孩子没有可能需要特殊关注的疾病、药物服用、过敏或残疾。
- 我知晓学校区（School District）提供了学生事故保险的信息供选用。该保险可经由 kidsplus.ca 项下的孩童事故附加险计划（Kids Plus™ Accident Insurance program）投保。家长可籍此在网上购买保险，获取索赔表格并可查阅全部相关信息。
- 我同意，当学校局的雇员、代理人 and 职员认为孩子的健康和需要紧急医疗服务和专业意见时，他们可确保获得该等服务和意见，我应对该等服务和意见的获得支付费用。

学生对安全、《学区行为守则》、风险认可之承诺

- 我下述签字表明，我承诺作为校体育队的一员我将言行举止安全且遵守《学区行为守则》。
- 我将尽力参加校体育队活动。
- 作为校体育队的一员，我将行为举止安全，并穿着适当且使用适当设备。
- 我的教练和/或带队老师已简要介绍了此次活动可能的风险和危险因素，以及应采取的防范措施。
- 作为校体育队的一员，我同意由教练和/或带队老师及监管人员提出的要求，并遵守《学区行为守则》、学校规定。
- 我将向体育总监、教练和带队老师报告任何安全、医疗或健康或受伤问题。

列治文中学体育协会 - 运动员的参与

- 我已阅读并理解该等活动会让参与活动的学生面临风险，并且我已阅读并理解上述 RSSAA、V&DIHSAA 及 BCSS 规则和规定。

体育部门政策

- 我已阅并理解，且同意 _____ (学校名称) 下述规则规定文件中所提要求：a) 列治文中学体育协会 - 运动员参与同意表、b) BC 省学校体育运动表：《学生运动员行为举止守则》及《观众行为举止守则》、c) 理念与政策、d) 活动费用、e) 着装要求、f) 冲撞意识、反应与管理协议、g) 乘车人员名单表

注：如您已在网上同意则无需交还此表

学生姓名
(请用正楷)

学生签字

日期 (年/月/日)

家长/监护人姓名
(请用正楷)

签字

日期 (年/月/日)

手机号码

电邮

紧急联系人
(请用正楷)

手机号码

与孩子的关系

可能影响孩子参与从此校外活动的医疗/身体情况（过敏、最近患病或受伤情况、最近住院或手术情况、慢性疾病、恐惧症等）包括（请详细填写）：