

Saint Lawrence Academy
Athletic Registration Form

Please Print

Student's Complete Legal Name _____
(Last) (First) (Middle)

Date of Birth _____ Grade _____ Sport _____
(Month, Day, Year)

Student Participation

As a condition of membership in the California Interscholastic Federation, all schools shall adopt policies prohibiting the use and abuse of androgenic/anabolic steroids. All member schools shall have participating students and their parents, legal guardian/caregiver agree that the athlete will not use steroids without the written prescription of a fully licensed physician (as recognized by the AMA) to treat a medical condition (Bylaw 524).

By signing below, the student-athlete hereby agrees that they shall not use androgenic/anabolic steroids without the written prescription of a fully licensed physician (as recognized by the AMA) to treat a medical condition. The athlete also recognizes that under CIF Bylaw 200.D., there could be penalties for false or fraudulent information. The athlete also understands that the Saint Lawrence Academy policy regarding the use of illegal drugs will be enforced for any violations of these rules.

This application to participate in athletics at Saint Lawrence Academy is voluntary on my part and is made with the understanding that I will abide by all the eligibility rules set up by Saint Lawrence Academy. I understand that at anytime I may be removed from the team for academic, disciplinary, attendance or sportsmanship issues. I have read and agree to the policies on the second page of this form:

Signature of Student _____ Date _____

Parent or Guardian Consent

I hereby give my consent for the above high school student to engage in interscholastic athletics at Saint Lawrence Academy. I understand that my son/daughter will be expected to adhere firmly to all athletic policies. I have read and agree to the policies on the second page of this form:

By signing below, the parent/legal guardian agrees that the above named student-athlete shall not use androgenic/anabolic steroids without the written prescription of a fully licensed physician (as recognized by the AMA) to treat a medical condition. The parent/legal guardian also recognizes that under CIF Bylaw 200.D., there could be penalties for false or fraudulent information and also understands that the Saint Lawrence Academy policy regarding the use of illegal drugs will be enforced for any violations of these rules.

Signature of Parent/Guardian _____ Date _____

Payment Information

Parent's Name _____ Check Number _____

Athletic Fees are due before an athlete begins practicing or competing with a team.

Fees:

Football: \$150

All other sports: \$100

Make Check Payable to:
Saint Lawrence Academy

Please return this form along with your payment to:
Saint Lawrence Athletic Department
2000 Lawrence Court
Santa Clara, CA 95051

Please Note: Fees are non-refundable after the athlete has competed in a contest and/or in any case of removal due to disciplinary, academic or attendance issues.