

**High School Athletics
Valley Christian School
EMERGENCY INFORMATION FORM**

IMPORTANT: This form must be filed with the school office before a student can participate in athletics.

STUDENT'S NAME: _____ **GRADE:** _____

PARENT(S) NAME: _____

EMERGENCY PHONE # _____

INSURANCE & DISCLAIMER

We acknowledge and recognize that hazards are present in athletic participation and that injury may result. My signature below authorizes Valley Christian School to obtain any emergency medical transportation or care that may become necessary in the course of athletic activities.

In case of an emergency involving my student at an athletic event, contact parents or call the emergency person listed below:

EMERGENCY PERSON (other than parent): _____

PHONE #: _____

PRIMARY PHYSICIAN: OFFICE PHONE:

HEALTH INSURANCE COVERAGE: YES / NO

IF YES, WHAT TYPE: HMO / PPO / OTHER

INSURANCE PROVIDER: POLICY #:

PREFERRED HOSPITAL:

PARENT/GUARDIAN SIGNATURE: _____ **DATE:** _____

A. AGE ELIGIBILITY (students cannot be 19 years old before August 31st of senior year)

Will this student be 19 years old before August 31st of his/her senior year? YES ___ NO ___

B. RESIDENCE

Does this student reside at home with his/her parents? YES ___ NO ___

C. TRANSFER STATUS

Is this student a transfer to Valley Christian this year? YES ___ NO ___

D. PHYSICAL EXAMINATION REQUIREMENT: State law requires students in grades 9-12 participating in school athletics to get a physical every year. If the student has had any serious accident, illness, or injury since the last physical examination, a physician's clearance is necessary.

E. Has student had serious injuries or medical problems requiring medical attention within the last year?

YES ___ NO ___

F. Does student have any ongoing significant disease or chronic illness such as epilepsy, diabetes, asthma, chronic heart disease, or severe allergies?

YES ___ NO ___

If YES to either E or F, please explain:

FOR OFFICE USE ONLY – All boxes must be checked before athlete is eligible to participate

- Physical on file
- Emergency information form
- Participation agreement form
- Name to AD for roster
- Name to Business office for sports fee
- Copy to coach for emergency file
- If transfer student – cleared/filed with MHSA

Cleared by: _____