



**LINCOLN CHARTER ATHLETICS
PARTICIPATION FORM**

The purpose of our athletic program is to allow our Middle School and High School student-athletes opportunity to participate on school athletic teams to broaden their experience at Lincoln Charter School. Athletic participation is a privilege, not a right. Student – athletes are expected to: maintain a 2.5 un-weighted GPA throughout their athletic season, conduct themselves as responsible citizens within the LCS community, have a current physical with the school, and all high school students must adhere to NCHSAA eligibility standards at all times.

Monetary support for athletic programs at Lincoln Charter comes from multiple sources. These include a \$40 participation fee for each student-athlete (per sport), game admission fees, concession sales, and occasional school-wide fundraising events. All of these monies are used to offset the cost of fielding athletic teams. The Lincoln Charter Sports Booster Club also supports athletics through fundraising. Please consider becoming an active part of this organization.

Lincoln Charter School offers a wide array of sports for all of our students and provides an excellent avenue for fun and fellowship for student-athletes of all ability levels. Your assistance is tremendously valuable to guarantee that the athletic experience at LCS is a positive one.

Go Eagles!

Jonathan Bryant
Athletic Director

Daniel Schmitz
Assistant Athletic Director

Please circle sport(s) considered

Fall	Winter	Spring
HS Men's Soccer	HS Men's Basketball	HS Baseball
HS Men's Cross Country	HS Women's Basketball	HS Softball
HS Women's Volleyball	MS Boy's Basketball	HS Men's Tennis
HS Women's Tennis	MS Girl's Basketball	HS Golf
HS Women's Cross Country	HS Swimming	HS Women's Soccer
MS Cross Country	MS Swimming	MS Baseball
MS Volleyball	HS Cheerleading	MS Softball
MS Soccer	MS Cheerleading	MS Golf
		MS Tennis

ASSUMPTION OF RISK

We acknowledge and understand that there is a risk of injury involved in athletic participation. We understand that the student-athlete will be under the supervision and instruction of LCS coach(es) in order to reduce the risk of injury to the student and others. However, we acknowledge and understand that neither coach nor LCS can eliminate the risk of injury in sports. Injuries may and do occur. Sports injuries can be severe in some cases they result in permanent disability and death. We freely, knowingly, and willfully accept and assume the risk of injury that may occur in participating in athletics and agree that we will hold LCS, conference affiliates, NCHSAA, coaches, LCS Staff, LCS Sports Booster, blameless in the event of an incident.

HIPPA/FERPA RELEASE

The above student-athlete understands his/her rights under the US Department of Health and Human Services guidelines. By signing this release, the student-athlete allows sharing of medical information between the Sports Medicine Staff (team physicians and medical staff, licensed athletic trainers) the LCS Athletic staff (Athletic Directors and Coaches), LCS Administration and his/her medical provider(s). In the event of an emergency situation, information may be shared with the emergency medical personnel.

TRANSPORTATION PARTICIPATION

The Athletic Department of Lincoln Charter School will transport student-athletes to and from practice and games (when bussing is available). I give my permission for my student-athlete (name) _____ to be transported by bus or carpool to and from practices and games.

MEDICAL HISTORY

---Parent/guardian must complete - please circle the best answer below---

Is there any reason to believe your student-athlete is unfit to participate in LCS Athletics-----Yes or No
- If yes, please explain _____

As parent/guardian of _____, I hereby give my consent for practice and play in the athletic events that are indicated above.

Signature of Parent/Guardian _____ Date _____

STUDENT-ATHLETE PARTICIPATION INFORMATION

Name (First, MI, Last): _____

Gender (M/F): ____ Age: _____ Grade: _____

Home Phone: _____ Cell: _____

Parent(s)/Legal Guardians(s): _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

*E-mail Address (Please list all applicable email addresses) _____

EMERGENCY INFORMATION

Name (First, MI, Last): _____ Relationship: _____

Home Phone: _____ Cell _____ Alt. Phone: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Family Physician/Pediatrician: _____

Phone: _____ Preferred Hospital _____

- Check appropriate box referencing student-athlete insurance
- Optional Student Accident Insurance (Information obtained via LCS)
- Personal Insurance Company
- None

Name of Insurance Company _____ Policy # _____ Group # _____

If "none" is checked above I understand I am waiving optional student-athlete personal insurance coverage

PARTICIPATION FEE

Athletic fees are **\$40**. This fee is for all student-athletes who participate in LCS athletics. This fee is *per student per sport* and is not a one-time fee. Participation fees cap at \$100 per student per school year. Therefore, if a student participates in three sports during a school year (fall, winter, and spring), their total participation fee will be \$100. Please note, this fee may not include additional uniform costs (ex. Cheerleading, baseball, etc.).

Please make your check payable to *Lincoln Charter Sports Boosters*.

If this fee is a financial hardship for your family, please contact Mr. Bryant at jonathan.bryant@lincolncharter.org for information about scholarships that may be available for families in need.

By signing this form below I understand the expectations and implications of being an LCS athlete.

Student Athlete Signature Date _____

Parent/Guardian Signature Date _____ Check # _____

*****This form should be remitted with all applicable fees including and not limited to the \$40 participation fee and a current physical must be on file with the school.*****