

Personal Information

Student's Name _____
Last First MI

Address _____, TX _____
Street City Zip

Phone _____ Date of Birth _____ Sex () Male () Female

Grade Level _____

Student will participate in these sports: (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> 5 th , 6 th Grade Girls Volleyball | <input type="checkbox"/> 7 th & 8 th Grade Girls Volleyball |
| <input type="checkbox"/> 5 th , 6 th Grade Boys Flag Football | <input type="checkbox"/> 7 th & 8 th Grade Boys Tackle Football |
| <input type="checkbox"/> 5 th , 6 th Grade Girls Basketball | <input type="checkbox"/> 7 th & 8 th Grade Girls Basketball |
| <input type="checkbox"/> 5 th , 6 th Grade Boys Basketball | <input type="checkbox"/> 7 th & 8 th Grade Boys Basketball |
| <input type="checkbox"/> 5 th , 6 th Grade Co-ed Soccer | <input type="checkbox"/> 7 th & 8 th Grade Co-ed Soccer |
| <input type="checkbox"/> 5 th , 6 th Grade Girls Track | <input type="checkbox"/> 7 th & 8 th Grade Girls Track |
| <input type="checkbox"/> 5 th , 6 th Boys Track | <input type="checkbox"/> 7 th & 8 th Grade Boys Track |
| <input type="checkbox"/> 5 th , 6 th Cheerleading | <input type="checkbox"/> 7 th & 8 th Grade Cheerleading |

- | | |
|--|---|
| <input type="checkbox"/> High School Girls Volleyball | <input type="checkbox"/> High School Boys Tackle Football |
| <input type="checkbox"/> High School Girls Basketball | <input type="checkbox"/> High School Boys Basketball |
| <input type="checkbox"/> High School Girls Bowling | <input type="checkbox"/> High School Boys Bowling |
| <input type="checkbox"/> High School Girls Track & Field | <input type="checkbox"/> High School Boys Track & Field |
| <input type="checkbox"/> High School Girls Tennis | <input type="checkbox"/> High School Boys Tennis |
| <input type="checkbox"/> High School Girls Cheerleading | |

Medical and Emergency Contact Information

Student's Name _____
Last First MI

Please notify the following in the event of an emergency involving this student:

Mother's Name: _____ Home Phone: _____

Cell Phone: _____

Employer: _____ Work Phone: _____

Father's Name: _____ Home Phone: _____

Cell Phone: _____

Employer: _____ Work Phone: _____

Please List two other people we may contact in the event we are unable to contact the parents:

Name: _____ Home Phone: _____

Cell Phone: _____

Employer: _____ Work Phone: _____

Name: _____ Home Phone: _____

Cell Phone: _____

Employer: _____ Work Phone: _____

If the student requires specific medical attention, please contact the doctor listed below who has knowledge about his/her situation/condition/treatment:

Doctor's Name: _____ Phone (1): _____

Phone (2): _____

Hospital of Choice:

Name of Facility Location

Alternate Facility Location

Please list any medical information that might assist emergency medical personnel in administering aid:

Transportation Permission Form

Memorial Christian Academy athletic teams will be participating in many events that require transportation to and from these activities. These activities may include but are not limited to: competitions, scrimmages, practices and team related field trips. If possible, all trips will be made on vehicles owned by Memorial Christian Academy or Memorial Baptist Church and operated by Memorial Christian Academy. All drivers are licensed and certified and have passed state mandated background checks. At times, such as unavailability of buses, Memorial Christian Academy may contract with a professional entity (charter bus) to provide adequate transportation.

I hereby give my permission for _____ to ride on school operated or contracted conveyance to and from all school sponsored athletic events.

Date: _____

Parent/Guardian Signature: _____

Parent and Student Notification Steroid Use Agreement Form

Memorial Christian Academy Policy

- ❖ Memorial Christian Academy school and athletic policy prohibits the use of anabolic steroids or any other performance enhancing drug. Athletes who are discovered using these drugs will be immediately suspended from the athletic program and face probable expulsion from school.

Legal Issues

- ❖ State law prohibits possessing, dispensing, delivering or administering a steroid in a manner not allowed by state law.
- ❖ State law requires that only a medical doctor may prescribe a steroid for a person.
- ❖ State law provides that body building, muscle enhancement or the increase in muscle bulk or strength through the use of a steroid by a person in good health is not a valid medical purpose.
- ❖ Any violation of state law concerning steroids is a criminal offense punishable by confinement in jail or imprisonment in the Texas Department of Criminal Justice.

Health Consequences Associated with Anabolic Steroids

(source: National Institute on Drug Abuse)

- ❖ For Boys and Men - Shrinking of the testicles, reduced sperm count, infertility, baldness, development of breasts, increased risk for prostate cancer.
- ❖ For Girls and Women - Growth of facial hair, male-pattern baldness, changes in or cessation of the menstrual cycle, enlargement of the clitoris, deepened voice.
- ❖ For Adolescents - Growth halted prematurely through premature skeletal maturation and accelerated puberty changes. This means that adolescents risk remaining short for the remainder of their lives if they take anabolic steroids before the typical adolescent growth spurt.
- ❖ For All Ages - Potentially fatal liver cysts and liver cancer, blood clotting, cholesterol changes, and hypertension which can promote heart attack, stroke and acne. Available evidence may suggest that anabolic steroid abuse, particularly in high doses, promotes aggression that can manifest as fighting, physical and sexual abuse, and property crimes. Upon stopping anabolic steroids, some abusers may experience symptoms of depressed mood, fatigue, restlessness, loss of appetite, insomnia, headaches, muscle and joint pain and the strong desire to return to the use of anabolic steroids.
- ❖ For Injectors - Infections resulting from the use of shared needles or non-sterile equipment, including HIV/AIDS, hepatitis B and C, and infective endocarditic, a potentially fatal inflammation of the inner lining of the heart. Bacterial infections can develop at the injection site causing pain and abscess.

Student Certification

I have read the above information and agree that I will not use illegal anabolic steroids.

Student Signature

Date

Parent/Guardian Certification

I have read the above information and agree to my knowledge my student will not use illegal anabolic steroids

Parent/Guardian Signature

Date