

Church League Basketball 2018 for High School Women

Dear Parent and Teen,

Thank you for your interest in Church League Basketball. Some important information:

A teen must be a parishioner of St. Francis Xavier to be on a St. Francis Xavier team. If you belong to a church that does not have a Church League team, you are welcome to play with us. However, if your church has a team, you are expected to participate with that team!

The league fee is \$75, which includes the team t-shirt. This permission form and fee must be returned **NO LATER** than **March 14th**. You are not officially part of the team until your fee and form have been submitted. Please submit both ASAP!

Practice for this league will be on Wednesday evenings at 7pm. **Our first meeting is Wednesday, March 14th at 7pm in Unity Hall and the first practice is Wednesday, March 21st.** Games are on Saturdays, and run from March through May. A schedule will be provided as soon it has been finalized.

Please contact Olivia Hollman at ohollman@sfxlg.org or 708-352-0168 x338 with questions or concerns.

Parental Permission and Release Form

I, _____, give my teen, _____
(Name of parent/guardian)

permission to play for a Church League basketball team. I am aware that games will be played PRIMARILY on Saturday nights from March through May at one of several possible locations (including gymnasiums at St. John of the Cross, St. Francis Xavier, and Congress Park Elementary School). In giving my permission, I hereby agree to RELEASE, INDEMNIFY, AND HOLD HARMLESS St. John of the Cross Parish, St. Cletus Parish, St. Francis Xavier Parish, Congress Park Elementary School and Elementary District 102, Davis Memorial A.M.E. Church, First Congregational Church of LaGrange, First Congregational Church of Western Springs, Grace Lutheran Church of LaGrange, LaGrange Christian Assembly, St. Isaac Jogue Parish, their employees & agents, and the Archdiocese of Chicago and the Catholic Bishop of Chicago (a Corporate Sole) from ANY and ALL liability which may arise from my teen's participation in the above mentioned league. Liability to extend to any accidents, illnesses or injuries, (including the possibility of death) which may either directly or indirectly befall my teen while participating in the above mentioned league, or while on property of above mentioned indemnities.

I also **give permission for my daughter to be transported to and from practice and games** by persons volunteering to provide such transportation. Otherwise, we will provide our own transportation for our daughter and/ or give her permission to get to and from practices and games on her own.

In the event that my teen shall become a discipline problem during practices or games, I realize that such behavior will not be tolerated and could result in my teen being asked to leave the team. In the event that my teen shall be found to be in the possession and/or usage of alcohol and/or other drugs; I realize that I will be notified, and that my teen may/will be subject to dismissal from team and subject to any and all applicable laws of the State of Illinois regarding such matters.

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In the event that a medical emergency shall befall my teen, and immediate attention is required, I now provide her Church League coach the ACTING POWER OF ATTORNEY, to initiate and oversee any emergency medical care that may be deemed necessary on my teen's behalf, until a time when I may be present to authorize the same. To assist in the administration of such care, I now provide all insurance & medical information which may be necessary. I also now provide all emergency contact information that is requested.

Insurance Company: _____ Policy Number: _____

Policy in Name of: _____

Allergies/medical conditions/medicines: _____

Hospital Preference: _____ Dr. _____

Please make the following contact in the order indicated when an emergency arises:

1 2 3 _____
Father Contact **Cell Phone**

1 2 3 _____
Mother Contact **Cell Phone**

1 2 3 _____
Other Contact **Cell Phone**

I acknowledge the importance of Church League as a place of Christian fellowship among players, coaches and spectators, and I will do my best to uphold these values. By placing my signature, I hereby attest that I have read, understand, and agree to ALL of the above provisions.

(Signature of parent/guardian) **Date**

Address: _____

Email Address: _____ (family mother father teen)

Teen Name: _____

Parish: _____

Grade Level: 9 10 11 12 **T-Shirt Size:** S M L XL XXL **Other:** _____