## ATHLETIC RESPONSIBILITY **ACKNOWLEDGEMENT FORM**



	Athlete's Name
	Date of BirthGrade Level 2022-2023 School Year
	Prior to participating in any interscholastic sport, a Ladue student shall:
1.	Successfully pass a physical examination by a registered physician and the copy of such examination must be on file in the Athletic Office. One current physical examination per year is sufficient for all sports during the school year.
2.	
3.	Return this signed <u>Athletic Responsibility Acknowledgement Form</u> to the Athletic Office by the end of the first week of practice.
	As a Ladue student-athlete participating voluntarily in interscholastic athletics, I understand that:
1.	I will abide by the Ladue student code of conduct, the school's athletic handbook, the coaches team rules, and the rules of the Missouri State High School Activities Association.
2.	I will conduct myself in an exemplary manner at all times.
3.	I will be responsible for all athletic equipment issued to me throughout the season, will
	return such equipment at the conclusion of the season, and will pay the current
	replacement cost for all of the equipment not accounted for by me at the end of the season.
	I understand that I will not be able to start practicing with another team if I have not complied.
4.	I, along with my parents/guardians, understand that the \$75 Activity Fee must be paid or it will be added to my student debt.
5.	I, along with my parents/guardians, certify that I understand all Ladue Academic, Athletic, and the Citizenship policies.
6.	I, along with my parents/guardians, agree to participate in the academic intervention program, if requested by the LHWHS Activities Department.
6.	I, along with my parents/guardians, certify that I am covered by accident insurance that provides protection for accidental bodily injury while participating in approved school athletics.
	Student Signature Date

Parent/Guardian Signature\_\_\_\_\_\_ Date\_\_\_\_\_