

PORTLAND CHRISTIAN SCHOOL
ELEMENTARY BASKETBALL SIGN-UPS

Dear Parents and Students,

PCS is excited to offer elementary basketball again this year. If you have participated before we hope you choose to do so again, and if this will be your first time, welcome!

Basketball is offered to both male and female athletes in grades 3-6. Practices are generally 1 to 2 days a week depending on the grade of your child. The number of games will vary depending on the grade of the child, (including league and tournaments). Elementary Athletic Fee is \$50 per sport and must be submitted with sign-up form. Sixth grade students that may play junior high basketball will be required to pay the \$100 junior high athletic fee.

Practices are generally held at the Westport Rd. campus unless we need to combine teams which may result in a change of location. You will be notified of any changes to the practice schedule.

Our teams participate in the Whitefield Academy League and the St. Frances League. Games will be played on Saturdays beginning October 21st. There will be a minimum of 6 games plus a tournament.

A PCS approved physical form physical must be completed and turned in by the time practice begins. For grades 3-5, the school physical will be accepted. For 6th graders the KHSAA requires an athletic physical. The physical form can be found on the school website, in the school office, or the KHSAA website. Your pediatrician should be very familiar with this form. If your child has already had the 6th grade physical, the doctor will simply need to transfer the information onto the athletic physical form.

Contact information for parents of registered players will be given to the coaches so that they are able to contact you regarding practice schedules.

Please fill out and return the back page to the school office by
Wednesday, September 6, 2017.

Hope to have your child participate!

Marie Settle, Assistant Athletic Director

502-429-3727

www.marie.settle@portlandchristian.org

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Please check the team in which your child would participate:

___ 3rd/4th girls ___ 3rd/4th boys ___ 5th/6th girls ___ 5th/6th boys

Elementary Athletic Fee is \$50 and must be submitted with this form.

Sixth grade students playing junior high basketball will be required to pay the \$100 junior high athletic fee.

Athletes name: _____ Gender: M / F

Grade: ___ Age: ___ Date of Birth: _____ Uniform Size: _____

Address: _____

Phone No. _____ Text: Yes / No

Parents email: _____

Have you played this sport before? Yes / No If yes, how many years: _____

Insurance: _____ Policy Number: _____

Medical

Issues/Allergies: _____

In case of emergency notify:

Parent(s): _____ Phone No. _____

Alternate: _____ Phone No. _____

My child has my permission to participate in the PCS Elementary Basketball program. In the event of injury or illness, I give my permission to seek appropriate medical treatment. If I cannot be reached, I give permission for medical personnel to administer medical care deemed necessary. Additionally, I give permission for my child to be transported to and from activities by PCS faculty, staff or volunteers. It should be noted that PCS, faculty, staff or volunteers will not be held responsible for any injuries that occur during participation or transportation related to said program.

Parent's signature: _____ Date: _____

Parent's signature: _____ Date: _____

Please fill out and return to the school, ATTN: Athletics Office.