

Player/Parent Registration Agreement

Sport: _____

Season: _____

SECTION I: IDENTIFICATION OF PARTIES:

The Western Carolina Athletic Association "WCAA" is a non-profit organization formed for the purpose of advancing athletic competition for home school students. Please complete registration form in its entirety, and attach all required forms including a copy of athlete's birth certificate. By filling out this form and paying the registration fees, you are agreeing on behalf of your child as well as you personally, to adhere to the terms contained herein as well as all rules and regulations adopted by and utilized on behalf of the WCAA.

Athlete's Name: _____ Grade: _____ Age: _____ Date of Birth: _____

Father's Name: _____ Cell #: _____

Mother's Name: _____ Cell #: _____

Athlete's Address: _____

City: _____ State: _____ Zip Code: _____ Phone #: _____

Athlete's Cell #: _____ Athlete's E-Mail Address: _____

Parent's E-Mail Address: _____

Registered Home School Name: _____

County in which Home School is Operated: _____ Chief Administrator: _____

Church Attend: _____

Emergency Contact: _____ Relationship: _____

Emergency Phone #'s: _____

REGISTRATION COSTS:

Each player will be required to pay \$185 per sport for both middle and high school. If player fees are not paid in full by the second week of the sport season, the same which is designated by the WCAA, then a \$50 late fee will be added to registration fees. Players will not be issued a uniform until registration fees are paid in full.

Note: the Registration costs may be subject to change prior to the start of the upcoming season due to unforeseen budget issues.

SECTION II: AGREEMENT CONCERNING NON-REFUNDABILITY OF FEES

(I) (We), the undersigned, as parent or guardian of a registered WCAA participant, hereby agree and understand that all registration and other fees I have paid to the WCAA are not subject to refund or return.

SECTION III: LIABILITY RELEASE

(I) (We), the undersigned, hereby waive and absolve the WCAA and all persons, affiliated with or working with, or for the WCAA, thereof, of any liability and responsibility for injuries, sickness, accidents, and/or acts of God incurred during the participation in camps, athletic games, clinics, private coaching, weightlifting, and or any related activity by my child. In consideration of my signed release allowing my child to participate in the WCAA activity, I, intending to be legally bound, do hereby, my heirs, executor, and administration, waive, release and forever discharge any and all rights and claims for damage which I may have or which may hereafter accrue to me against the WCAA, directors, coaches, representatives, volunteers and/or assignee, for any and all damages which may be sustained or suffered by me or my child in connection with my association with or participation in, or arising out of travel to and/or from respective activities. In event of injury/accident/sickness, the WCAA directors and/or coaches are to contact the designated adult listed on the registration form.

SECTION IV: INSURANCE AGREEMENT

(I) (We), the undersigned, certify that I understand that I can not file for reimbursement of medical expenses on behalf of my child or ward under WCAA provided insurance until after I have paid the deductible amount (if any), and my personal insurance (if any), and/or any other institutional insurance has first been paid whatever insurance amounts are appropriately due under these policies.

MY/OUR PRIMARY INSURANCE PROVIDER IS: _____ POLICY NUMBER: _____

INSURANCE PROVIDER PHONE #: _____

I also acknowledge that before my (our) child can participate in such school-sponsored sport(s) this consent must be executed by me (us) and filed with the athletic association, together with the results of a physical examination indicating that my child is physically fit to participate in such school sponsored activities

SECTION V: CONSENT FOR TREATMENT AND GRANT OF IN LOCO PARENTIS STATUS

(I) (We), the undersigned, parent(s) or guardian(s) of _____, a minor, do hereby authorize the coaches or other WCAA agents permission to seek medical attention for said minor in the event of injury, illness or accident arising from his/her participation in any WCAA activity. It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required but is given to provide authority and power on the aforesaid agent(s) to give specific consent to any and all such diagnosis, treatment or hospital care which the physician in the exercise of his/her best judgment may deem advisable; and neither said coaches nor agent of the WCAA assumes any financial responsibility for exercising this action.

SECTION VI: AGREEMENT TO WCAA PROCEDURES, POLICIES AND BI-LAWS FOR INVESTIGATION OF COMPLAINT AND ALLEGATIONS

(I) (We) the undersigned, as participants, parent or guardians, agree without purpose of evasion or mental reservation to fully support and abide by the WCAA's complaint and allegation investigation policies. (I) (We) understand that failure to honor this pledge constitutes grounds for disciplinary actions by the WCAA up to and including fines, lesser disciplinary actions, and removal from leadership positions or dismissal from the WCAA.

SECTION VII: AGREEMENT TO EXPOSURE OF PARENT/GUARDIANS AND PARTICIPANTS TO DISCIPLINARY SANCTIONS FOR VIOLATES OF WCAA BY-LAWS, PROCEDURES RULES AND POLICIES

(I) (We), the undersigned, agree to follow the terms of participation and attendance at WCAA events as a participant, parent or guardian and/or spectator without purpose of evasion or mental reservation. (I) (We), the undersigned, certify that I will submit myself to any disciplinary actions and/or sanctions properly imposed by appropriate WCAA authority for any infractions of the WCAA's by-laws, policies and procedures. (I) (We) understand that (I) (We) have the option of resigning WCAA membership and any leadership positions in lieu of accepting any disciplinary actions and/or sanctions properly imposed by appropriate WCAA authority for any infractions of the WCAA's by-laws, policies and procedures.

SECTION VIII: AGREEMENT TO COLLECTION AND SAFGUARDING OF PERSONAL DATA ON PARTICIPANTS AND PARENTS/GUARDIANS

(I) (We), the understand, agree to willingly participate in WCAA sponsored information gathering efforts to further the mission of the WCAA, aid in the free flow of information in the public domain as well as the exchange of information with other organizations having similar missions and academic institutions conducting research that may be helpful to the WCAA with the provision the WCAA take reasonable precautions to avoid releasing personal identification data without my/our expressed written permission.

SECTION IX: PARTICIPANT'S AND PARENT'S CODES OF CONDUCT AND ADHERENCE TO CHRISTIAN BEHAVIOR AT PRACTICES AND COMPETITIONS

(I) (We), the undersigned, agree to the following terms of participation and attendance at WCAA events as a participant, parent, or guardian and/or spectator without any purpose of evasion or mental reservation. (I) (We), the undersigned, certify that (I) (We) will, to the best of our ability, conduct ourselves in accordance with the behavior expectations established in the WCAA's by-laws, policies and procedures and the WCAA's Code of Conduct, which are posted on line at www.wncaa.org , to which (I) (We) have ascribed.

Prohibited actions specifically include, but are not limited to, the following:

- Inappropriate attire, Appropriate attire must be worn at all times.
- Angry or vulgar language, including swearing and name-calling.
- Physical contact with another person in any angry or threatening way.
- Any demonstration of sexual activity or sexual contact with another person.
- Harassment or intimidation by words, gestures, body language or any menacing behavior.
- Theft or behavior that results in the destruction of property.
- Carrying or concealing any weapons or devices or objects that maybe used as weapons.
- Using or possessing illegal chemicals or alcohol at any WCAA sponsored event or any event which the athletes of WCAA are participating.
- Any other conduct of any inappropriate, threatening or offensive nature.

SECTION X: ACADEMIC STANDING:

I (We) agree and affirm that our student athlete is in good standing with all state and local educational boards as required by law; furthermore, I (We) agree that WCAA requires a cumulative grade average of at least a C in order for my (our) student athlete to participate in WCAA athletics: I (We) agree to immediately notify the coaching staff in the event my (our) student athlete's grade point average falls below the above mentioned grade average.

NOW THEREFORE IN CONSIDERATION OF THE TERMS AND CONDITIONS CONTAINED HEREIN, AS WELL AS IN CONSIDERATION OF THE DUES PAID AS REQUIRED HEREIN, THE UNDERSIGNED DOES HEREBY AGREE TO THE AFOREMENTIONED TERMS AND CONDITIONS. FURTHERMORE, I (WE) REPRESENT THAT I (WE) HAVE READ ALL OF THE TERMS AND CONDITIONS REFLECTED HEREIN AND THAT I (WE) UNDERSTAND AND AGREE TO THE SAME.

Parent Signatures: _____

Date: _____

Date: _____

Player's Signature: _____

Date: _____

WCAA OFFICIAL USE ONLY

SPORT: _____

PAID \$ _____

CASH

CHECK # _____

PAYPAL _____

SCRIP _____

SCHOLARSHIP
AMOUNT \$ _____

BIRTH CERTIFICATE

PHYSICAL FORM

OPPORTUNITIES TO VOLUNTEER

Accented By: _____

WCAA OFFICIAL USE ONLY

SPORT: _____

PAID \$ _____

CASH

CHECK # _____

PAYPAL _____

SCRIP _____

SCHOLARSHIP
AMOUNT \$ _____

BIRTH CERTIFICATE

PHYSICAL FORM

OPPORTUNITIES TO VOLUNTEER

Accented By: _____

WCAA OFFICIAL USE ONLY

SPORT: _____

PAID \$ _____

CASH

CHECK # _____

PAYPAL _____

SCRIP _____

SCHOLARSHIP
AMOUNT \$ _____

BIRTH CERTIFICATE

PHYSICAL FORM

OPPORTUNITIES TO VOLUNTEER

Accented By: _____