

TELEOS PREPARATORY ACADEMY
LION ATHLETICS
JUNIOR HIGH ATHLETIC TEAM REGISTRATION FORM

NAME OF STUDENT: _____ Grade & Section: _____

CONTACT EMAIL: _____ (This email will be used for all contact information between the school, coach, parents, and player during the season!)

CONTACT PHONE #: _____

PLEASE CHOOSE (CIRCLE) FROM THE FOLLOWING JH ATHLETIC TEAMS:

FALL: G VOLLEYBALL CROSS-COUNTRY FOOTBALL

WINTER: G SOFTBALL BASEBALL

SPRING: B BASKETBALL G BASKETBALL TRACK & FIELD

THE REGISTERING STUDENT MUST READ, SIGN, AND DATE THE FOLLOWING STATEMENT!

As a student at Teleos Preparatory Academy I acknowledge that participating in athletics is a privilege, not a right, and I commit to exhibit exemplary behavior both in and out of the classroom and remain in good academic standing to preserve this privilege. If at any time my coach or teachers believe that I have not lived up to this standard of behavior, I acknowledge that my coach and/or athletic director has the right to take away this privilege and remove me from my current athletic team with no refund of my activity fee.

Student Signature: _____ Date: _____

Please make check payable to **“Teleos Preparatory Academy”** in the amount of **\$90**. Please put the name of the sport on the memo line of the check. Return payment AND completed form to the front office before the first practice/tryout for the particular sport. Checks will be held for those students participating in a tryout until after team selection has been finalized. Students who do not make a team may have this fee transferred to another activity or it will be returned.

I HEREBY GIVE MY PERMISSION FOR MY CHILD TO PARTICIPATE IN THE SELECTED ACTIVITY. I UNDERSTAND THAT TRANSPORTATION TO AND FROM PRACTICES & GAMES IS THE SOLE RESPONSIBILITY OF THE PARENT. I AGREE TO PAY A DAMAGES FEE OF \$100 FOR ANY UNIFORM THAT IS NOT RETURNED IN ITS PROPER CONDITION. ALL ATHLETIC INFORMATION CAN BE FOUND ON THE TELEOS PREPARATORY ACADEMY WEBSITE AT www.teleosprep.org

Parent/Guardian Signature: _____ Date: _____

ANY FORMS THAT ARE NOT SIGNED BY BOTH THE STUDENT & PARENT AND DO NOT HAVE THE PROPER PAYMENT WILL NOT BE ACCEPTED!

If you have any questions, please contact Mr. Joseph at jjoseph@teleosprep.org or 602-275-5455.