

St. Paul MS/HS Athletic Participation Form 2026-2027

St. Paul School District is proud of its athletes and athletic programs. Our coaches, administrators, teachers, students and community expect athletes to have good attendance, represent the district positively at all times and behave appropriately. The guidelines set forth below have been established as a minimum code for athletes.

Student's Last Name: _____ Student's First Name: _____

Gender Male ☐ Female ☐ Grade: _____ Date of Birth: _____ Student Cell Phone: _____

Home Address: _____

Name of Parent/Guardian (where student resides) _____

Father's Name _____ Phone: _____ email: _____

Mother's Name _____ Phone: _____ email: _____

PLEASE READ CAREFULLY

- Proof of **MEDICAL INSURANCE IS REQUIRED** before any athlete will be allowed onto the field/court for practice.
- ST. PAUL SCHOOL DISTRICT: **DOES NOT** carry student accident insurance for athletes.
- Student school insurance may be purchased through the district at <https://myers-stevens.com>.

List Medications: _____ List Allergies: _____

Name of Physician: _____ Phone Number: _____

Medical Insurance Co: _____ Policy/Group Number: _____

Medical Release

In the event of an emergency, after every effort has been made to contact me by telephone, the undersigned parent/guardian does hereby authorize the district to obtain any medical care or hospitalization of my child, as they believe necessary for the welfare of my child. I do further authorize any medical doctor or hospital to provide any treatment believed necessary for immediate care of my child. The undersigned agrees to pay for such medical treatment and shall hold the district harmless from any liability, claims, judgments, and costs incurred as a result of any such medical treatment or hospitalization.

X _____
Signature of Parent/Guardian Date

Training Rules:

The contract will be enforced the first day of fall practice until the completion of the academic school year and/or sports season, whichever is longer. The contract is also enforced at all SPSPD sponsored events in season or out of season.

Policy Concerning Improper Conduct

The St. Paul High School rules for all students apply, and in addition, the following special rules regarding athletic and activities participation will apply.

Athletics and activities participants **MAY NOT**:

1. Be insubordinate or be determined an aggressor in a fight.
2. Possess or use any tobacco product.
3. Possess, use, sell and/or distribute any non-prescribed narcotic drug, hallucinogenic drug, amphetamine, barbiturate, marijuana, alcoholic beverage, or intoxicant of any kind. It is an automatic second violation for any athlete who distributes and/or sells drugs or alcohol.
4. Host or attend a social function for minors where the above products are in possession, being used, sold, or distributed. An athlete must leave **immediately** from a site where alcohol or drugs are present.
5. Significant misbehavior included but not limited to assault, robbery, or drunken driving.

The policy and rules outlined above will be used by the coaches & administration to determine consequences, but do not supersede district policy or administrative rules.

I understand and agree to the above terms.

Parent/Guardian: Signature X _____ Date: _____

Student Athlete: Signature X _____ Date: _____