

**NORTH ROYALTON SCHOOL DISTRICT
EMERGENCY MEDICAL AUTHORIZATION**

**STUDENT ATHLETE
DATA SHEET
ATHLETIC
ELIGIBILITY**

SCHOOL _____
STUDENT NAME _____
ADDRESS _____
TELEPHONE _____
SPORT(S) _____
YEAR _____ GRADE _____ DATE OF BIRTH _____

PURPOSE - To enable parents and guardians to authorize the provision of emergency treatment for children who become ill or injured while under school authority, when parents or guardians cannot be reached.

Residential Parent or Guardian

Mother's Name _____ Daytime Phone _____
Father's Name _____ Daytime Phone _____
Other's Name _____ Daytime Phone _____
Name of Relative of Childcare Provider _____
Relationship _____ Phone _____

PART I OR II MUST BE COMPLETED

PART I - TO GRANT CONSENT

I hereby give consent for the following medical care providers and local hospital to be called:

Doctor _____ Phone _____
Dentist _____ Phone _____
Medical Specialist _____ Phone _____
Local Hospital _____ Emergency Room _____
Phone _____

In the event reasonable attempts to contact me have been unsuccessful, I hereby give my consent for:

- 1.) the administration of any treatment deemed necessary by above named doctor, or, in the even the designated preferred practitioner is not available, by another licensed physician or dentist.
- 2.) the transfer of the child to any hospital reasonable accessible.

Facts concerning this child's medical history including all allergies, medication being taken, and any physical physical impairments to which a physician should be alerted:

Date _____ Signature of _____
Parent/Guardian _____
Address _____



**NORTH ROYALTON
CITY SCHOOLS
& OHIO HIGH
SCHOOL ATHLETIC
ASSOCIATION**

STUDENT'S NAME _____ PRESENT GRADE _____

STUDENT'S DATE OF BIRTH _____ / _____ / _____ PRESENT AGE _____
Month Day Year

Parent/Guardian Names _____

Address _____
Street City State Zip

Phone Number _____ Date Entered NRHS _____ / _____ / _____
Month Day Year

I. AGE REQUIREMENTS

- 1.) Did you turn 19 years of age before August 1st?
- 2.) Have you been in high school (Grades 9-12) for more than 4 years? Yes No

II. RESIDENCE REQUIREMENTS

- 3.) Are you presently living with a parent or individual who does not have legal custody of you? Yes No
- 4.) Are you an independent (emancipated) student? (Emancipated means a student who is not living in the same school district as his/her parents and is financially self-supporting.) Yes No
- 5.) Does your custodial parent or guardian reside outside the North Royalton School District? (Reside means eat, sleep, maintain voting record, receive mail and spend the majority of non-work time.) Yes No

III. ENROLLMENT REQUIREMENTS

- 6.) Did you enroll after the 1st day of your 9th grade year? Yes No
- 7.) Are you a foreign exchange student? Yes No
- 8.) Did you transfer from a private or parochial high school this year? Yes No

IV. ACADEMIC ELIGIBILITY

- 9.) Did you fail to meet the academic requirement of having passed five (5) courses valued at one (1) unit during the preceding nine weeks? Yes No

V. I HAVE READ THE NRCS ATHLETIC RULES Yes No

VERIFICATION

***NOTE: ANY CHANGES THAT OCCUR IN-SEASON MAY AFFECT ELIGIBILITY (RESIDENCE, CUSTODY, CLASS SCHEDULE, ETC.) PLEASE NOTIFY THE ATHLETIC DIRECTOR IMMEDIATELY IF ANY SUCH CHANGES DO OCCUR.

TO THE BEST OF MY KNOWLEDGE, THE ABOVE INFORMATION IS CORRECT. I UNDERSTAND THAT IF I FALSIFY INFORMATION OR FAIL TO REPORT AND CHANGES, IT COULD CAUSE ME TO BE INELIGIBLE, AND IT COULD CAUSE MY TEAM TO FORFEIT CONTESTS.

STUDENT SIGNATURE _____ DATE _____

PARENT SIGNATURE _____ DATE _____

North Royalton City Schools

1. All athletes must maintain proper sportsmanship, character and conduct, in and out of each sports season, so that no discredit is brought upon themselves, their school, their team and their community.

2. The use and possession of Alcohol, Tobacco, Drugs, any mood altering chemicals, and Steroids by the student-athlete is prohibited. The first violation of this rule is immediate denial from participation and denial for 50% of athletic contests/events/activities (season or tournaments) based on the number of regular season scheduled events.

3. The sale or distribution of Alcohol, Tobacco, Drugs, and mood altering chemicals, and Steroids by the student-athlete is prohibited. The first violation of this rule is immediate dismissal from the team for 1 full calendar year. This includes denial of participation on any other sports teams for the full calendar year.

4. The athlete accepts the responsibility of all equipment issued him/her by the Athletic department and is expected to return the same equipment in good condition at the conclusion of participation in any given activity; also, if articles have been LOST or STOLEN, the athlete SHALL PAY FOR THEIR EQUIPMENT REPLACEMENT.

5. In any given sports season, an athlete who goes out for a certain sport may quit and select another sport (in season) if he/she does so before the first scheduled game of the first sport is held. If an athlete quits a sport after subsequent sport's first game, he/she becomes ineligible for any conditioning program or any subsequent sport's season until the conclusion of the said sport. If an athlete is cut from a squad, he/she becomes eligible for another sport.

6. In grades 9-12, the North Royalton High School policy states that students participating in athletics or any co-curricular activities must attend school for a full day to be eligible to participate in practice, a game or participate in an event.

The above regulations should be read, signed and returned to the coach.

We have read and understand the above regulations.

Student-Athlete Signature Date

Parent/Guardian Signature