

GREENVILLE COUNTY SCHOOLS



Athletic Participant Application and Permission for 2016-17 for Home School Students

Directions: The below information is to be filled out by the designated individuals and **the parent/legal guardian must present** this with all requested documents to the school athletic director of the resident public school where the student seeks to participate. All requested documents and fees are to be attached with this form. **This form is required for each activity and must be done each year.** Items marked with an asterisk * are required only for those activities governed by the SC High School League.

Section I: Required Documentation – Upon presentation of this application, the parent/legal guardian must have:

- 1. Proof of Residence:** 1. Driver’s license or a government issued photo ID; 2. One current major utility bill (electric, gas, water); 3. Current Lease, Property Tax Notice, or Mortgage Statement—if not available, a second major utility bill may be substituted for this (#3).
 - 2. South Carolina Certificate of Immunization** (this document is required **before** any participation)
 - 3.** Most recent **report card and transcript from previous school year** from your home school association accountability office/group (**must be on letterhead and signed by the records official**) (required for each sport)
 - 4. * Physical Examination/Parent Permission Form** completed, signed, and attached (once per year).
 - 5. * Student Athletic Insurance** (\$22middle / \$40 high) attached /included (once per year)
 - 6. * Risk Acknowledgement Form** signed and attached (one time only for entire school career)
 - 7. * State Certified Copy of Student’s Birth Certificate** attached (will be return to student; (one time only for entire career).
- NOTE: All above forms online at <http://www.greenvillecountyathletics.com>**

Section II: To be completed by the parent/legal guardian of the student

_____			____/____/____
Extracurricular Activities for which the Student Seeks to Participate			Date of Application
_____	_____	_____	____/____/____
Student’s Last Name	First Name	Middle Name	Date of Birth
_____		_____	_____
Address		City/Town	Zip Code

Name of Parent or Legal Guardian (please print clearly)			
I certify the address above is our legal residence, the above named student resides with me, and I am his/her parent or legal guardian.			
_____			Signed: Parent or Legal Guardian

Section III: To be completed by the Administrator of the student’s home school (parent/guardian)

2016-17 Grade Level of Student: _____. Year the Student Entered 7th (for MS student) 9th (for HS student) Grade: _____

I certify the following items regarding the above student’s information as being truthful and accurate:

- 1. The student has been taught in the home school setting for one full academic year prior to this application.**
- 2. The student is eligible at our resident school and has met all requirements for eligibility of the South Carolina Code of Laws (Section 59-39-160) and *Article VII of the South Carolina High School League’s Constitution.**

Signed: Administrator of Home School (parent/guardian)

Defined Extracurricular Activities include those activities sponsored solely by the resident school, carry no academic credit, do not all within the scope of the regular curriculum, or have a requirement for enrollment in a class during the regular academic day at the resident school.



Office of the Director of Athletics
GREENVILLE COUNTY SCHOOLS

21 May, 2016

TO: Charter, Home, and Governor's School Students

FROM: Darryl Nance, Director of Athletics

Re: Participation in Extracurricular Activities

Welcome to the Greenville County Schools' extracurricular programs. As you are aware, two state statutes were added to the South Carolina Code of Laws in 2012, that allow charter school, home school and governor's school students to tryout for and, if selected, participate in extracurricular activities at their resident schools. Thank you for considering trying out for an athletic team or participating in an extracurricular activity at the resident traditional public school within your attendance zone. We want to make your transition into our programs as smooth as possible.

Extracurricular activities in the Greenville County Schools are those activities sponsored solely by the resident school, carry no academic credit, do not fall within the scope of the regular curriculum, or have a requirement for enrollment in a class during the regular academic day. To participate in one of these activities you will be asked to complete the application packet which can be obtained at your school, from our webpage at www.greenvillecountyathletics.com, or directly from one of our schools. The application is self-explanatory. Please understand that we are not requiring anything of you that we do not require of any other student coming into Greenville County Schools.

We are strong advocates of the value of extracurricular activities. It is in these vital programs where young people learn lifelong lessons as important as those taught in the classroom. These extracurricular activities support the academic mission of our schools, are inherently educational, and foster success in later life.

Again we welcome you and wish you well. Should you have any questions, do not hesitate to contact me.

Darryl Nance, Director of Athletics
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Office: 864.355-3987 • Fax 864.355-9154 • Email: dnance@greenville.k12.sc.us

GREENVILLE COUNTY SCHOOLS



PARENTS'/GUARDIANS'/ATHLETE'S Risk Acknowledgement

Athlete's Name: _____ Date of Birth: _____

My/Our child wishes to participate in the athletic program at _____ high school.
(name of school)

I/We realize that there are risks involved in this participation and attended a group meeting on _____
(date)

where these risks were discussed and explained. The meeting was run by _____
(name of school person)

We had the opportunity to have all our questions answered.

I/We understand that the risks include a full range of injuries, from minor to severe. I/We recognize the possibility that my/our child might die, become paralyzed, or suffer brain damage or other serious, permanent injury as a result of participation in this sports program. I/We realize that neither the protective equipment and padding used in athletics programs, the safety rules and procedures of the various sports, the coaching instruction received, nor the sports medicine care provided to athletes will guarantee safety or prevent all injuries he/she might sustain. I/we agree to accept these risks as a condition of my/our child's participation in this program.

In consideration for my/our child's participation in the program, I/we hold harmless and release Greenville County Schools and its employees, agents, coaches, volunteers, trustees, and USA Football, Inc., from all present and future liabilities, expenses, damages, losses, injuries, judgments, and claims, of whatsoever, in equity or at law, which I/we or my child may have, whether known or unknown, suspected or unsuspected, asserted or not asserted, arising out of participation by my/our child in the program.

ADDITIONAL OR SPECIAL CONDITIONS Risk Acknowledgement

(NOTE: Fill this box out ONLY if your child has a pre-existing condition that may increase risk of injury and/or illness. If this section does not apply to you, then write "not applicable" or "NA" in the first space.)

I also realize that my/our child's _____ creates additional risks and
(condition)

I/we discussed these risks with the athletic director, coach(es), and the sports medicine provider(s) in a meeting on _____. They explained to me/us that, because of this condition, the special risks for my/our child are (List all concerns. Should you need more room, write on the back of this form. Write legibly.):

I/we understand these concerns and agree to follow all directions and recommendations of my/our physicians and sports medicine providers in this program. I/we also agree to accept these additional risks as a part of my/our child's participation in the program.

Date

Signature of Parent/Guardian

Date

Signature of Athlete/Participant