



St. Mary Central Catholic High School Athletic Department

Ryan Wikel, Athletic Director  
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 Sandusky, Ohio 44870

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## Parental Approval Form

**A. Student-Athlete Information:**

Student Name	
Grade	
Age	
Home Address	
Father's Name	
Father's Phone	
Mother's Name	
Mother's Phone	

**B. Permission for Participation Accident Waiver**

By signing below, the parent/guardian gives permission for the above named student-athlete to participate in interscholastic athletics at Sandusky Central Catholic School/St. Mary's High School during the 2016-2017 school year. The parent/guardian also agrees that they and/or their insurance companies will accept responsibility for medical bills that might result from injury. (The Ohio High School Athletic Association provides insurance coverage for medical bills exceeding \$25,000 up to a maximum of \$105,000).

**C. Agreement to abide by school athletic training rules and academic eligibility requirements.**

The athletic department asks all athletes and their parent/guardian to go over together the training rules and academic eligibility requirements of the high school. Hopefully, a thorough understanding of these rules and regulations will prevent future problems. All students are provided with a student handbook. The training rules and academic eligibility requirements can be found in that handbook.

By signing below, the parent/guardian and the athlete will indicate that they have gone over these rules and regulations, and agree to abide by them.

This form should be signed and returned to the athlete's coach or to the athletic director before taking part in any practices or contests.

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Athlete Signature: \_\_\_\_\_

Date: \_\_\_\_\_