

**7Madison Campus Elementary & Madison Academy's Athletic Department**

1515 Sutherland Drive & 100 Academy Rd. Madison, TN 37115

Athletic Director: Seth Perkins

**Medical Consent, Athletes Participation Contract & Code of Ethics, Parental Questionnaire Form**

**Permission and Medical Consent Form**

2021 – 2022

When signed, this form gives permission to participate in, and travel to and from athletic events, practices, and all athletic sponsored events with school personnel or other authorized personnel. It also authorizes emergency medical treatment for this student while participating in any Madison Campus Elementary or Madison Academy's Athletic Department sanctioned athletic events, practices, or sponsored department events. I/We hereby give

consent for (athlete's name) \_\_\_\_\_ to represent (name of school) \_\_\_\_\_ in athletics realizing that such activity involves potential for injury. I/We acknowledge that even with the best coaching, the most advanced equipment, and strict observation. On rare occasions these injuries are severe and result in disability, paralysis, and even death. I/We further grant permission to the school and TSSAA & TMSAA, their physicians, athletic trainers, and/or EMT to render aid, treatment, medical, or surgical care deemed reasonably necessary to the health and well being of the student athlete, named above, during or resulting from participation in athletics. By the execution of this consent, the student athlete named above and his/her parent/guardian(s) do hereby consent to screening, examination, and testing of the student athlete during the course of the preparticipation examination by those performing the evaluation, and to taking of medical history information and the recording of the history and the findings and comments pertaining to the student athlete on the forms attached hereto by those practitioners performing the examination. As parent or Legal Guardian, I/We remain fully responsible for any legal responsibility which may result from any personal actions taken by the above named student athlete.

In case of emergency please notify:

1st name and phone#: \_\_\_\_\_ # (\_\_\_\_) \_\_\_\_\_ Relationship: \_\_\_\_\_  
(First and Last Names Please)

2nd name and phone#: \_\_\_\_\_ # (\_\_\_\_) \_\_\_\_\_ Relationship: \_\_\_\_\_  
(First and Last Names Please)

Hospital Preference: \_\_\_\_\_ Doctor Preference: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_

Insurance: \_\_\_\_\_ Policy Number: \_\_\_\_\_ Group Number: \_\_\_\_\_

Athlete Allergies: \_\_\_\_\_ Medications: \_\_\_\_\_ Other: \_\_\_\_\_

..... May we give Tylenol/Ibuprofen? ..... YES.....NO..... Dosage: \_\_\_\_\_/mg  
(Please circle one)

Madison Campus Elementary & Madison Academy's Athletic Department requires each athlete to have a yearly physical examination before participating in any athletics.

\_\_\_\_\_ My child has had a sports physical examination. It states that my child is physically fit to participate in athletics for the school year 2021-2022, and a copy will be given to the athletic department's Athletic Director Seth Perkins (either by dropping it off at the MCE or MA front office for him or giving it to the athletes coach).

**Name of Parent/s or legal guardian:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Madison Campus Elementary & Madison Academy's Athletic Department**  
**Athlete's Participation**

Since Madison is involved in extracurricular events, we feel it is important to maintain a high standard of excellence in character as well as academic performance. One normally only thinks of a high winning standard; however, at Madison we stress the attitude of character growth of our athletes. This along with the code of Ethics listed later is considered to be areas for evaluating exemplary behavior in our Christian lives and general school life.

The following are but not limited to qualities for evaluation of exemplary behavior: Loyalty – Team Player; Consistency – Availability; Dependability – Reliable; Honest – Trustworthy; Priorities – Solid Commitment; Submission – Coach ability; Responsibility – Maturing Perspective; Spiritual Perspective – Christ-centered Values.

Athletes and their coaches are prominent in school society and must accept being constantly in the spotlight. Because of the nature of their unique position athletes must accept the idea of their adhering to a higher standard for behavior.

Therefore, I, \_\_\_\_\_, understand that as an athlete at Madison, I must maintain an academic standard of a 2.5 GPA and no F's. I further agree to abide by the character qualities for a higher standard of life as set forth above. I will submit to the leadership of the school in their effort to help me maintain these academic and character standards.

**Athlete's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Code of Ethics**

Athletics is an integral part of the school's total educational program. All school activities, curricular and extra- curricular, in the classroom and on the playing field, must be congruent with the school's stated goals and objectives established for the intellectual, physical, social and moral development of its students. It is within this context that the following Code of Ethics is presented.

As an athlete, I understand that it is my responsibility to:

- 1) Place academic achievement as a high priority.
- 2) Show respect for teammates, opponents, officials and coaches.
- 3) Respect the integrity and judgment of game officials.
- 4) Exhibit fair play, sportsmanship and proper conduct on and off the playing field.
- 5) Maintain a high level of safety awareness.
- 6) Refrain from the use of profanity, vulgarity and other offensive language and gestures.
- 7) Adhere to the established rules and standards of the game to be played
- 8) Respect all equipment and use it safely and appropriately.
- 9) Refrain from the use of alcohol, tobacco, illegal and non-prescription drugs, anabolic steroids or any substance to increase physical development or performance that is not approved by the United States Food and Drug Administration, Surgeon General of the United States or American Medical Association.
- 10) Know and follow all state, section and school athletic rules and regulations as they pertain to eligibility and sports participation.
- 11) Win with character, lose with dignity.

**Parents Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Athlete's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Athlete's Printed Name:** \_\_\_\_\_

**Madison Campus Elementary & Madison Academy's Athletic Department**

**Parent Questionnaire & Information**

Would you be willing to :

- \_\_\_\_\_ 1) Be a Team Parent (help organize transportation, refreshments or fundraising)
- \_\_\_\_\_ 2) Help with transportation to games and tournaments
- \_\_\_\_\_ 3) Help with refreshments or food for games and tournaments
- \_\_\_\_\_ 4) Help with fundraising
- \_\_\_\_\_ 5) Help with our booster club
- \_\_\_\_\_ 6) Donate Money
- \_\_\_\_\_ 7) Other (Fill in the Blank) \_\_\_\_\_

**Communication**

Please understand that involvement in athletics is a commitment to the school and the team. Athletes must communicate with the coaching staff/athletic director to advise them of any problems they may have in the schedule. This is necessary to run a quality program. We, the coaching staff/athletic director, will advise the parents with a schedule of all games and notify you of changes. The school calendar (found on the schools website <https://mcesda.org/> or <https://www.madisonacademy.com/calendar/>) will be where general information about games can be found. If last minute changes occur the coach will communicate with the team about those specific changes. An email and/or text will periodically come out from the coaching staff/athletic director, please list the best phone number to receive quick messages (below in parent permission). If you have any concerns or questions please call and talk with us or stop by and we will gladly discuss the situation with you.

**Participation & Transportation Permission**

Therefore, we, \_\_\_\_\_ give permission to  
(Parent's printed name)

\_\_\_\_\_ to participate in the athletic program of the Madison  
(Athlete's printed name)

Campus Elementary and Madison Academy. Additionally, I give permission for my student to be transported to and/from the games/meets in school vehicles or school-approved volunteer vehicles.

\_\_\_\_\_ (initial) I give permission for my high school student to drive him/herself to and from specific local games/meets when also approved by school administration.

**Parent Phone #:** \_\_\_\_\_ **Students Phone #:** \_\_\_\_\_

**Parent's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*\* The athletic department would like to thank each of you, our parents, for your generosity and patience, and your willingness to help out with our department's events and activities. We understand the time and commitment that you are making to our department by entrusting us with your children. We will do our best to guide your children to be the best Christ centered athletes possible.*

# Madison Campus Elementary & Madison Academy's Athletic Department

## Financial Contract

Dues are a necessary part of our Athletic Department. They help pay for the teams' travel expenses, league fees, equipment, awards, uniforms, and referee fees.

By signing below, I authorize Madison's Athletic Department for dues that will be charged to my daughter's/son's account. Additionally, the uniforms are on loan and I understand that if my uniform is not returned and washed at the end of the season an additional fee of \$100.00 will be charged to the student's account.

**Please circle the sport your child will be participating in:**

<b>Cross Country</b> MCE = \$100 MA - \$100	<b>Volleyball</b> MCE = \$150 MA = \$200 Practice Team = \$50	<b>Basketball</b> MCE Varsity = \$150 MCE Jr Varsity = \$75 MA = \$200
<b>Tennis</b> MA = \$150	<b>Soccer</b> MCE Varsity = \$150 MCE Practice Team = \$75 MA = \$200	<b>Gymnastics</b> MCE Clinic = \$150/semester MCE Team = \$150/sem = \$300/yr <i>(full yr commitment required)</i> MA Team = included in daily class schedule w/ lab fee

Parent's Signature: \_\_\_\_\_

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

Athlete's name (print): \_\_\_\_\_