

**Loma Linda Academy Athletic Department**  
10656 Anderson Street  
Loma Linda, CA 92354

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A.D Lucio Camacho

**ATHLETE-PARENT INFORMATION, TREATMENT AND RELEASE FORM**

Date \_\_\_\_\_ Sport(s) \_\_\_\_\_

Student's Name Last \_\_\_\_\_ First \_\_\_\_\_

Parents Name Last \_\_\_\_\_ First \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_

Important Information (Allergies, Allergic to any medication or on medication, diabetic, asthma, or anything we should know for the well-being of your child) \_\_\_\_\_

**Things that must be done before participating in any varsity sport.**

1. Turn in your physical from a licensed physician saying your child is physically fit to play in our varsity program and waiver/release form (this one).
2. Register online
3. Pay for spirit wear and any other extras (Participation fees will be billed to account)

**PARENT QUESTIONNAIRE**

Would you be willing to:

- \_\_\_ 1. Be a team mom (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.

**PARENTAL PERMISSION FOR MEDICAL TREATMENT**

In the event of sudden illness or accident requiring attention, I hereby authorize Loma Linda Academy to administer first aid, and if necessary take my child for emergency treatment to any qualified emergency care center.

I approve the following to be administered to my child on an as needed basis: All \_\_\_ Only those checked \_\_\_

Tylenol \_\_\_ Advil \_\_\_ Sudafed \_\_\_ Tums \_\_\_ Benadryl \_\_\_ Cough Syrup \_\_\_

(Parent Signature) \_\_\_\_\_

**RELEASE FORM**

I indemnify and hold harmless the sponsors, Loma Linda Academy and Southeastern California Conference and Association of Seventh-Day Adventist, for the liability arising from any accident or injury occurring during High School varsity sports activities (Flagball, Cross Country, Swim, Volleyball, Soccer, Basketball, Golf, Baseball, Badminton and Softball). This specifically includes injury arising from negligence of those mentioned above. This recognizes a shared responsibility between school, student and home. This does not include gross negligence on the part of those mentioned above. This does not waive coverage within the policy limits of the student accident insurance which covers school sponsored activities.

(Student Signature) \_\_\_\_\_ (Parent Signature) \_\_\_\_\_