

ARCHDIOCESE OF LOS ANGELES
DEPARTMENT OF CATHOLIC ELEMENTARY & JUNIOR HIGH SCHOOLS
ATHLETIC ACTIVITY PERMISSION FORM

Athletic Activity:

(Check or "X" one)

Volleyball Football Basketball
 Softball Track and Field Competition

Competitions:

Cheerleading Song-leading

Tournaments:

Golf Soccer Baseball

Participation Level:

(Check or "X" one)

Varsity "A" "Bee" level

Participant's Name: _____

(Please Print)

Grade: _____ **Birthday:** _____

Parent / Guardian's Name: _____
(Please Print)

Home Address: _____
Street, _____ City, Zip

Home Phone: _____ **Work Phone:** _____

Mobile Phone: _____ **Other:** _____

In Case of An Emergency

Name: _____
(other than yourself)

Contact Number: _____