

Traverse City Elementary Athletic Members

T.E.A.M.

“Together Everyone Achieves More”

Welcome, over the past few years, T.E.A.M. has stepped up its sportsmanship efforts in an effort to emphasize what is truly important in educational athletics. As a result, we feel our coaching staff, our student-athletes and the student body in general have benefited. All of these groups display exemplary behavior at our events. We have raised their expectations.

But there is one group, which we need to intensify our sportsmanship efforts with--parents. It seems that over time, parents have lost sight or have never known that the true meaning of educational athletics is to do just that--educate. It's not about wins and losses. It's not about championships or the remote pipe dream of earning an athletic scholarship to college. It's about learning. And learning the values taught by athletics, especially respect, is what set school sports apart of other levels of competition. It's why school sports exist.

As a society, we are constantly bombarded with the message that winning is everything. Not everyone can win every game, or finish first in every race. But everyone can practice the Golden Rule—treating others the way they wish to be treated, with fairness and respect. That is the true value in playing school sports.

Please take a few moments to review the participation guidelines below; stating the example T.E.A.M. expects a participant to display at athletic events. As a representative of your school, your actions are viewed by family, friends, opposing fans, the local community and the media. Displaying good sportsmanship will show the most positive things about you and your school; and hopefully, remind us that in the end, sport is meant to be FUN.

T.E.A.M. Participation Guidelines

All Participants will learn and practice good sportsmanship.

All Participants will respect and support coaches, officials, players and fans at all times.

All Participants will never publicly criticize other coaches, officials, players, or fans from any team.

Swearing, cursing or put downs of any kind, will not be tolerated.

All Participants will cheer and support outstanding effort by all teams in a positive-only manner.

All Participants will maintain self control and demonstrate proper behavior at all times.

All Participants will try and learn the rules of the sport to have a better understanding of what happens on the playing field.

A Participant is any Parent, Guardian, Coach, Player, Official or Fan.

*Always remember that
Good Sports are WINNERS*

T.E.A.M. looks forward to serving you in the year ahead, and appreciates your continued support.

T.E.A.M.

PARTICIPATION / CONSENT FORM

PLEASE PRINT CLEARLY

Name of Athlete: _____ School: _____ Grade: _____

Athletes Signature: _____ Date: _____ Gender: M / F Age: _____

I, the undersigned parent/guardian of the child named above, herby give my consent for such child to participate in the sports programs indicated, which are being offered by the Traverse City Elementary Athletic Members (T.E.A.M.) for the current school year.

I herby hold T.E.A.M. it's employees, and agents harmless for injuries sustained by such child as a result of participation in the sports programs. I agree to assume full financial responsibility for medical treatment necessary as a result of any such injury.

The undersigned does herby grant to the individuals (name of the coach and one other adult) listed below the responsibility for care of the child.

Name of Coach Name of Responsible Adult

Or, in the event neither of these individuals is available, I grant the attending hospital emergency room physician and/or nurse the limited power of attorney to act for me and to give the required consent and authorizations for the delivery of medical care, diagnosis and treatment, including surgical intervention, if necessary, on behalf of my minor child named above.

Parent/Guardian Signature: _____ Phone # _____

Name of Parent/ Guardian: _____ Work Phone # _____

Address: _____ Emergency Phone # _____

Parents email _____

Emergency contact person: _____ 2nd Emergency # _____

Private Physician: _____ Physicians Phone # _____

Insurance Company: _____ Policy # _____

Date of last Tetanus immunization: _____ Known Allergies/ Significant Medical History: _____

Circle sport: Cross Country Girls Basketball Boys Basketball Co-ed Volleyball Track & Field
Pay to play fee: \$ 25.00

Make checks payable to T.E.A.M. (no cash please). All fees are non refundable.

The Participation / Consent Form and Payment must be turned in to your coach before the athlete can practice.

By signing this Participation Form, the student and parent/guardian agree to follow all school and T.E.A.M participation rules and guidelines.