

Palo Alto Chinese School Sports Sign-UP and Waiver Form

As the parent(s) or guardian of (I/We) hereby give permission for (him/her) to participate in the Palo Alto Chinese School sports activities. By giving this permission, (I/We) and the named player agree that the Palo Alto Chinese School, its entire staff faculty including but not limited to board members, teachers, team, coaches and parent volunteers, shall not be liable for any injuries or losses sustained by the player while playing, practicing, traveling, or participating in any tournaments or social events.

In signing of this waiver below, the Parents (or guardian) and the named player above, agree to the above waiver and rules of the Palo Alto Chinese School.

The parent(s) or guardian also authorizes the Chinese Palo Alto School to obtain medical treatment and services for their child when the parent(s) or guardian is not present, and agrees to pay the fees and costs of such treatment and services.

Signature of Parent/guardian _____ **Date:** _____

Personal Information:

Player's name: (Chinese) _____ (English): _____

Address: _____

Phone: _____ School: _____

Birth Date: _____ Height: _____ Weight: _____

Father's name: _____ Phone: _____

Email: _____ Cellular: _____

Mother's name: _____ Phone: _____

Email: _____ Cellular: _____

Emergency Information:

Family Doctor: _____ Phone: _____

Alternate Contact:

Name: _____ Phone: _____

Any physical limitations: Yes No

If yes, describe: _____