VETERANS MEMORIAL HIGH SCHOOL
ATHLETICS COMMITMENT

_____ _____ _____
Student Name ID Number Grade

Sport to be on the student's schedule (specify level: I,II,III, IV)

_____

Coach's Name: _____

_____ _____
Coach's Signature Date

I understand that in high school athletics I am required to get a physical. I must dress out and participate in class daily, practice before and/or after school and participate in games. Passing grades must be maintained to stay eligible to compete.

_____
Student Signature Date

_____
Parent Signature Date

If the physical and associated paperwork is not complete within the first week of school, you will be removed from the class. You may be removed from the class for disciplinary reasons at any time.

This form must be returned to your counselor. Without this form you will not be scheduled into an Athletics period.