

Crownover Athletic Oath

Please read the information below, **parent and student initial each line**, and parent and student sign and date the Crownover Athletic Oath.

____/____ I have read and understand all policies and procedures of the Crownover Girls' Athletic Program.

____/____ I understand I am responsible for all school issued uniforms and equipment.

____/____ I understand quitting mid-season I will receive a grade of 75 for the six weeks.

____/____ **I understand that no jewelry is allowed during practices or competitions. No piercings are allowed during the year (including off-season). NO EXCEPTIONS It can result in a schedule change.**

____/____ **I understand that I will need to maintain a natural hair color during all seasons. Extreme colors will not be allowed during games. NO EXCEPTIONS**

____/____ I understand I have to pass all academic classes to participate in games.

____/____ I understand I need to be present and on time for all games and practices.

____/____ I understand that if I am injured or physically unable to participate in practices or games for an extended period of time my schedule may be changed at the coaches' discretion.

____/____ I understand there is a zero-tolerance for violating the policy for cell phones, iPods, and/or mp3 players. If I am caught with a cell phone or other prohibited devices, it can be confiscated and turned into the office, where an administrative fee will be required before being returned to a parent (please see Crownover Student Handbook for cell phone policy)

____/____ **I clearly understand that I am COMMITTED to the contents of this Oath.**

Student-Athlete Signature: _____ Date: _____

Parent Signature _____ Date: _____

*******PRINT THIS PAGE ONLY AND RETURN TO THE COACHING STAFF*******