



**SPORTS REGISTRATION  
ST. THOMAS AQUINAS REGIONAL SCHOOL ATHLETICS  
WINTER SEASON 2018-2019**

Students in grades (6-8) are eligible to participate in the following sports:  
(Please check one and return the applicable fee)

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

**Make Checks Payable to: St. Thomas Aquinas Regional School**

- Boys' Basketball Fee: \$80.00
- Girls' Basketball Fee: \$80.00
- Girls' Cheerleading (4<sup>th</sup>-8<sup>th</sup>) Fee: \$80.00/ \$105 new cheerleaders  
\*\*NEW 4<sup>th</sup> & 5<sup>th</sup> grade cheerleaders accepted on a space available status\*\*
- Boys' Wrestling (5<sup>th</sup>-8<sup>th</sup>) Fee: \$80.00
- Boys' Wrestling (3<sup>rd</sup>-4<sup>th</sup>) Fee: \$50.00

Teams may fill before registration closes. Please turn in registration form and fee as soon as possible to ensure a spot on the team.

Students participating in a school sponsored sport must have a sports physical. The only form that will be accepted for a student participating in a school sponsored sport is the **St. Thomas Aquinas Regional School Athletic Participation/Parental Consent/ Physical Examination Form**. The form can be found in the school office, clinic, or on the school website @ [www.aquinastars.com](http://www.aquinastars.com). The sports physical must be dated on or after June 1, 2018. Please direct questions regarding the sports physical to the school nurses at (703) 491-4447, ext. 278. No other physical forms will be accepted.

Please provide your email below, as you will be contacted by a Team Parent regarding information concerning try-outs, practice times, and games, as soon as possible. It is the parent's responsibility to provide transportation to and from practices and games. **Any game scheduled on early out days or after school hours will have transportation provided by parents.** If other transportation arrangements are to be made (i.e. bus), the Athletic Department will provide information, fees, and permission forms for each event that requires transportation.

**To be completed by the parent/guardian:**

I give my son/daughter, \_\_\_\_\_, permission to participate in the St. Thomas Aquinas Regional School Athletic Program. As the parent/guardian of the participant, I recognize and acknowledge that there are certain risks associated with participation in sports and I assume the full risk of any injuries, damages, loss or death which may occur as a result of participating in any and all activities connected with the STARS Athletic Program.

I understand that neither STARS, nor any of its agents can assume responsibility for any injury that might occur while participating in this program. In the event of any emergency, if I cannot be contacted, the school has my permission/authorization to transport and seek any medical treatment deemed necessary for my child's immediate care, at the nearest emergency room and that I will be responsible for payment of any and all medical services rendered.

\_\_\_\_\_ **Parent's Signature**                      \_\_\_\_\_ **Email**                      \_\_\_\_\_ **Date**

Athletic Office Use Only: WINTER Payment \_\_\_\_\_ CC \_\_\_\_\_ Check# \_\_\_\_\_ Cash \_\_\_\_\_  
Physical \_\_\_\_\_ Registration \_\_\_\_\_ Info \_\_\_\_\_ Transp. \_\_\_\_\_ Uniform \_\_\_\_\_ Conc \_\_\_\_\_