**Player Checklist ’17-’18 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Revised 4/4/16**

**Sport / Activity**

**On File With Head Coach Prior To First Practice**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Student Name**  **(Alphabetically)** | **Sport / Activity** | **Grade**  **6/7/8**  **9/10/11/12** | **Proof of Residency** | **Physical** | **Consent – Athletic Participation** | **Concussion Page** | **Sudden Cardiac Arrest Page** | **Baseline Test**  **(Bi-Annual) Show Date**  (Basketball, Wrestling, Cheerleading, Soccer, Baseball, Softball, Football, Volleyball) |
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**Head Coach Signature Date**