

**MINNEAPOLIS PUBLIC SCHOOLS
ATHLETIC REGISTRATION AND EMERGENCY INFORMATION CARD**

Student Name _____ Grade _____
PRINT Last First
Address _____ Zip _____ ID # _____

Email _____ ARE YOU A TRANSFER STUDENT? YES NO
(You must complete MSHSL forms with the AD to be eligible)

Parent/Guardian (person to be notified in case of emergency)
Name _____ Daytime Phone _____
Email _____ Evening Phone _____

Alternate Person to Notify
Name _____ B Basketball . . . \$75 G Basketball . . . \$75
Phone _____ Dance . . . \$75 Gymnastics . . . \$75
B Swim . . . \$75 Wrestling . . . \$75
B or G Hockey . . . \$240 XC Ski . . . \$75 MAST (Alpine) Ski . . \$75

EMERGENCY MEDICAL CONDITION:

For Athletic Office Only -----
Physical _____ MSHSL Form _____ Fee _____ Check / Cash
Eligible YES NO Reason _____
GPA _____ Credits _____
AD Signature

MEDIA RELEASE FORM

Minneapolis Public Schools

Throughout the year, media may visit our events, request information about our events as well as footage of our events. The Athletic Department of the MPS will be releasing your child's name and images for many reasons including but not limited to team rosters, promotional material, game footage, team pictures as well as information for college recruiters if appropriate. This information may be used or shown on websites, radio stations, television stations, school programs, posters, brochures and newsletters. Because of state law, a school must obtain your permission before your child's photograph or voice can be used by the media or the district. Please sign this document giving your permission to allow interest for promotional, informational as well as education purposes. Thank you for your cooperation.

I give my permission for _____ ID# _____
PRINT STUDENT NAME

To be filmed, photographed, interviewed and/or listed by the media during the school events and for the athletic departments to use for promotional information and education purposes.

Parent/Guardian Signature Date _____