

# Texas Association of Private and Parochial Schools

## STUDENT ACKNOWLEDGMENT OF RULES



Student Name:

Date of Birth:  Current Grade:

TAPPS School



**This form must be signed by both the students and parent/guardian and be on file at the TAPPS member school prior to the student participating in any Inter-scholastic contest.**

According to the rules outlined in the TAPPS Constitution and By-Laws, by initial of the following, we attest that the above named student:

- | Student                  | Parent  |
|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> has not reached 19 years of age prior to September 1 on the current school year.   |
| <input type="checkbox"/> | <input type="checkbox"/> has not graduated from high school.  |
| <input type="checkbox"/> | <input type="checkbox"/> did not enroll in the <b>NINTH GRADE</b> more than 4 years ago, nor <b>TENTH GRADE</b> more than three years ago               |
| <input type="checkbox"/> | <input type="checkbox"/> is a full time day student taking at least four core courses on the campus of the TAPPS member school                          |
| <input type="checkbox"/> | <input type="checkbox"/> has not represented a college in a contest   |
| <input type="checkbox"/> | <input type="checkbox"/> are not in violation of the TAPPS Awards Rule  |
| <input type="checkbox"/> | <input type="checkbox"/> is in compliance with the TAPPS academic eligibility rules as presented in the TAPPS Constitution, By-Laws, and Contest rules. |

- |                          |  |
|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> <b>did not</b> transfer to the TAPPS member school from another high school for the current school year |
| <input type="checkbox"/> | <input type="checkbox"/> <b>did</b> transfer to the TAPPS member school for the current school year.                             |

**In order to be eligible for Varsity Participation, the student must have transferred to the TAPPS member school prior to the following deadlines. By initial, the parent/guardian attests that the following deadline was met.**

- |                          |  |
|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> <b>September 8, 2010</b> <b>FALL SPORT DEADLINE - Cross Country, Fall Soccer, Football, Volleyball</b>  |
| <input type="checkbox"/> | <input type="checkbox"/> <b>December 8, 2010</b> <b>WINTER SPORT DEADLINE - Basketball, Swim and Dive, Winter Soccer, Wrestling</b>  |
| <input type="checkbox"/> | <input type="checkbox"/> <b>February 23, 2011</b> <b>SPRING SPORT DEADLINE - Baseball, Golf, Softball, Tennis, Track and Field</b>   |
| <input type="checkbox"/> | <input type="checkbox"/> is in compliance with the Transfer Rules presented in the TAPPS By-Laws Section 104 and has not "followed" any coach this current school year from a previous school. |

- |                          |  |
|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> is in compliance with By-Laws Section 136 and 139 in that the student shall not play for a coach from the TAPPS member school he/she is attending on a non-school team from the beginning of TAPPS activities in August until the last day of the current school year as determined by the TAPPS member school. |
| <input type="checkbox"/> | <input type="checkbox"/> is living with their parents, attending an approved TAPPS Boarding School, or has been received approval to participate in TAPPS Extra-Curricular activities while living with a guardian as outlined in the TAPPS By-Laws.   |
| <input type="checkbox"/> | <input type="checkbox"/> has been presented the information presented in the TAPPS By-Laws Section 87 and is in compliance with all rules and regulations pertaining to the Recruiting, Inducement, and Tampering of students.   |

Student Name:

Parent

I hereby give my consent for the above named student to compete in TAPPS approved contests and travel with the director or other representative of the school on any trips. Neither TAPPS nor the member school assumes any responsibility in case of accident or injury.

I hereby agree to be responsible for the safe return of all equipment owned by the school and issued to the above named student.

If, in the judgment of any representatives of the school, the above named student needs immediate care and treatment as a result of injury or illness, I do hereby request, authorize, and consent to such care and treatment as may be given to said student by any physician, trainer, nurse, hospital or school representative; and do hereby agree to indemnify and save harmless TAPPS, TAPPS Staff, TAPPS Executive Board, TAPPS Representatives, the school and any school representative from any claim by any person whomsoever on account of such care and treatment of said student.

I understand that I may film or video any game in which my son/daughter participates, but the film or video may not be viewed by the athlete or coaches until the game is over.

I understand that I can not film or video tape any contest in which my son/daughter is not participating without the written permission of both schools involved in the contest.

I understand that if my son/daughter is disqualified (ejected) from a contest, that the penalty includes a fine of at least \$50 being assessed to the school and a one (1) game suspension for my child.

I understand that if my son/daughter is disqualified (ejected) from additional contests, that the Athletic Executive Committee may impose additional penalty to the school and student.

I attest that my son/daughter will abide by all TAPPS Rules as presented in the TAPPS Constitution, By-Laws and Contest Rules.

I understand that if my son/daughter is not in compliance with the TAPPS Constitution, By-Laws and Contest Rules that the eligibility of my son/daughter and the teams involved may be subject to sanctions and penalty.

I understand that the executive management, control and final authority of this association (TAPPS) rests with the TAPPS Executive Board.

**We hereby attest that the information presented on this form is correct as indicated by the initials present beside each item.**

Student Signature  Date

Parent Signature  Date

Parent Name

Parent Address:

**DO NOT SEND THIS FORM TO THE TAPPS OFFICE OR DISTRICT PRESIDENT UNLESS REQUESTED.  
MUST BE KEPT ON FILE AT THE MEMBER SCHOOL.**