

# Northern Freeze Athletics

Tri-County Schools

PO Box 178, Karlstad, MN

Phone: 218-436-2374 Fax 218-436-3422

Activities Director: Gary Taylor

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## Authorization to Participate in an Activity 2018-2019

Student Name: \_\_\_\_\_

Grade: \_\_\_\_\_ Sport/Activity: \_\_\_\_\_

Tri-County High School/Northern Freeze student athletes will not be allowed to participate in the above sport/activity until the following items are in the TC High School Office.

Requirement	In Compliance:
Physical Exam (every 3 years)      Date	
2018-2019 MSHSL Form	
MSHSL Health Questionnaire	
Insurance OR Waiver	
Fee Payment \$30/60/120	
Permission to Treat	
IMPACT	

**Activity Fee Paid?      Amount \_\_\_\_\_ Paid/arrangements**

Note: The student should fill out the top portion of this form and return to the Activity Office along with the completed paperwork. When the Activity Office has verified that all items are in, the athlete should bring the form to the coach. It is the responsibility of the coach in charge of this athlete to ensure all items have been turned in before the athlete is allowed to practice.

Yes, all above items have been turned into the TC Office.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Gary Taylor

*Please keep all forms stapled together.*

**Fees:** \$30 per sport per student/ \$60 Individual max and \$120 Family Max

**Passes:** Family \$125/Adult \$50.00/ Student \$25