

# SELAH FOOTBALL

## 2019 POLICIES & STANDARDS / WARNING / PARENT-COACH RELATIONSHIP ACKNOWLEDGEMENT FORM

*Please sign and return to Coach Ditter by the Monday prior to the player's first eligible competition.*

I have read through and understand the policies /standards & parent/coach relationship information regarding the Selah High School football program. I am willing to uphold the guidelines and display the expected behaviors for the integrity and success of our program.

Parent/Guardian (print) \_\_\_\_\_

Signed: \_\_\_\_\_ Date \_\_\_\_\_

Athlete (print) \_\_\_\_\_

Signed: \_\_\_\_\_ Date \_\_\_\_\_