

Registration Form for KCEA Sports Tournaments

School _____ City _____ Contact Person _____

Competition (soccer/volleyball/basketball). We wish to compete in (circle one or both): Boys / Girls _____ (sport)

Competition (cross country). We wish to compete in (circle one or both): JH / SH

Enrollment. Enrollment in grades 7-12 (as defined in the Handbook): Boys _____ Girls _____ Total _____

- | | |
|--|--|
| 1. If the Committee holds two or more tournaments, we prefer to participate at the higher division based on enrollment. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. We are a KCEA-affiliated school, in good standing, and current in our financial obligations to KCEA. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. We have completely read the KCEA Sports Tournaments Administrative Handbook. We will abide by all these rules. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4. We have taken the responsibility to ensure that all players are covered by insurance either by the school or by the parents. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5. We have taken the responsibility to ensure that either (a) each player or participant has had a physical or (b) the parents have signed indicating their acceptance of responsibility for the same. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 6. We have taken the responsibility to ensure that we have a proper academic eligibility policy and that all participating students will meet KCEA’s policy requirements or not participate in this event. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 7. We understand that it is the primary responsibility of the school to check every player and staff member for compliance and enforce compliance with KCEA standards prior to each game, and to supervise their personnel at all times. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 8. We will have a student cheerleading team in attendance at the tournament. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 9. In addition to this form, we are submitting a typed Team Roster Form of the athletes eligible to compete on our team in the KCEA Tournament, including the names, birth date, grade in school, number, and position. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 10. In addition to this form, we are submitting a Schedule Information Sheet listing all of the requested information relating to this year’s schedule and record to date. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 11. In addition to this form, we are submitting a Part-Time Student Eligibility Confirmation Form . | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 12. We are mailing the appropriate fees to the KCEA office. (Please make checks payable to KCEA.)
<i>(If not received by the payment deadline, the team will be withdrawn.)</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No |

(School Official #1 Signature)

(Position)

(School Official #2 Signature)

(Position)

Volleyball Line Judges. If registering for a Girls Volleyball tournament, provide the names and contact information for the line judges who will represent your school at the state tournament. ****Each judge will be responsible to cover at least one game in which their school is not playing. One judge may be nominated to cover both games in which their school is not playing.****

(Name)

(Phone Number)

(Email Address)

(Name)

(Phone Number)

(Email Address)

(School Official #1 Signature)

(Position)

(School Official #2 Signature)

(Position)

Send the Registration Fee and applicable Line Judge Deposit to the KCEA office.

Team Roster Form *(excluding Cross Country)*

TOURNAMENT: Boys / Girls (circle one) _____ (sport)

School _____ City _____

Contact Person _____ Phone _____

Team/Mascot Name _____ School Colors _____

Dominant Uniform Color: Home _____ Away _____

Athletic Director's Name _____ Coach's Name _____

Home Phone _____ Home Phone _____

Email _____ Email _____

Provide the following information for all players who participated during the regular season. If a player is ineligible, ~~strike through their information~~. Indicate if the player was a starter with an "S" in the last column.

Name	Jersey #	Age <small>(as of 9/1)</small>	Birth Date	Grade	Position	Height	F.T. / P.T. Student	Ineligible, Reg. Season Starter? "S"

**PART-TIME STUDENT
ELIGIBILITY CONFIRMATION FORM
FOR KCEA-SPONSORED ACTIVITIES**

School: _____ City: _____

Check if there are no part-time students participating in this event.

Check if there are part-time students participating in this event.

This is to confirm the listed part-time student's eligibility for participating in: (Please check the appropriate box or fill in the blank.)

KCEA Sports Tournaments – Boys [] Girls []

KCEA Creative Writing – Elem. [] Jr H [] Sr H []

KCEA All-State Choir []

KCEA Festivals – Jr H [] Sr H []

KCEA Bible Quizzing – Jr H [] Sr H []

KCEA Written Competition – Elem. [] Jr H [] Sr H []

KCEA All-State Band/String Orchestra – []

Other: _____

Part-Time Student's Name	Please circle the course(s) in which the student is enrolled: Math Science English History Bible Other: _____	Is the registration fee paid equivalent to a full-time student's fees? Yes No	Is the enforcement of department and academic standards the same as for a full-time student? Yes No	Is chapel attendance in the required proportion to class load? (Minimum 1 per week.) Yes No
	Math Science English History Bible Other: _____	Yes No	Yes No	Yes No
	Math Science English History Bible Other: _____	Yes No	Yes No	Yes No
	Math Science English History Bible Other: _____	Yes No	Yes No	Yes No
	Math Science English History Bible Other: _____	Yes No	Yes No	Yes No
	Math Science English History Bible Other: _____	Yes No	Yes No	Yes No
	Math Science English History Bible Other: _____	Yes No	Yes No	Yes No
	Math Science English History Bible Other: _____	Yes No	Yes No	Yes No
	Math Science English History Bible Other: _____	Yes No	Yes No	Yes No
	Math Science English History Bible Other: _____	Yes No	Yes No	Yes No
	Math Science English History Bible Other: _____	Yes No	Yes No	Yes No

Pastor/Administrator's Signature: _____ **Date:** _____

Schedule Information Sheet

School _____ City _____ Contact Person _____

Tournament: Boys / Girls (circle one) _____ (sport)

Official Season Record: _____ Wins _____ Losses

Give a complete listing of every sports event, whether called a game or otherwise, wherein the game's score has been kept or is scheduled to be kept. Additionally, list other pertinent game information in the Comments field, and other general information about the current year's team in comparison with the previous year's team (e.g., number of returning players/starters, strength/weakness in comparison, growth/challenges in the current season, etc.) in the provided space after the schedule information.

Ex: 9/15

Cherrydale Christian, Cherrydale

A (Away)

W (Won)

59-51

Tight game

Date	School Name/City	Place	Result	Score	Comments
		H A	W L T		
		H A	W L T		
		H A	W L T		
		H A	W L T		
		H A	W L T		
		H A	W L T		
		H A	W L T		
		H A	W L T		
		H A	W L T		
		H A	W L T		
		H A	W L T		
		H A	W L T		
		H A	W L T		
		H A	W L T		
		H A	W L T		

Please provide general information comments about this year's team to assist the Sports Committee in determining team strength in comparison with the previous year's squad. (For example, *"This year's team lost 4 starters from last year's squad and struggled at the start of the year. The team grew substantially through the year in spite of a few key injuries and won 6 straight games against quality opponents at the end of the season. Even though our record stands at 8-7, our team has improved through the season and is better now than its record indicates."*)

Athletic Player, Coach/Team Personnel, or Spectator Disqualification Form

According to the KCEA Sports Tournament Administrative Handbook’s General Guidelines:

“If a player, cheerleader, or coach is ejected during a KCEA tournament (including play-in games), the individual is automatically ineligible to participate in the team’s next game. Any spectator who is ejected must leave the premises for the remainder of the day but may return for the next day’s game(s)” *(Christian Sportsmanship, #5)*.

This form should be completed by the Tournament Director while still at the tournament site. Additional comments may be made by the ejecting official. The Tournament Director, in turn, will submit it to the KCEA office with the final tournament report.

NAME OF EJECTED PERSON		SCHOOL NAME	
GAME DATE	GAME LOCATION	GAME START TIME	
VISITING TEAM/SCHOOL		VISITING TEAM’S FINAL SCORE	
HOME TEAM/SCHOOL		HOME TEAM’S FINAL SCORE	
NAME OF EJECTING OFFICIAL		TOURNAMENT LEVEL AA AAA	

Reason for Disqualification

(Use Back of Form if Necessary)

Report Date

Ejecting Official’s Signature