



FPC Athletic Authorization Statement

I do hereby understand and give the Head Coach, Assistant Coaches of my respective sport, and the President of Frank Phillips College permission to communicate with my parent(s) or guardian(s), former high school or college coaches, summer league coaches, prospective employers, educational or professional individuals that could further my educational or professional advancement concerning information about grades, compliance or non-compliance of Frank Phillips College team policies, my mental or physical health, or progress in the area of my team at Frank Phillips college.

I do hereby authorize information related about myself and all statistics in regards to my athletic performance to be released to all media, included but not limited to: newspaper, television, radio, websites and sports publications.

I do hereby authorize information pertaining to academic records, financial aid and employment, relevant to my educational activities, to be communicated to my parent(s) or guardian(s).

Further, the above persons may communicate with my instructors, coaches, professional staff and administrators of Frank Phillips College concerning all of the above.

Print Name

Signature

Social Security Number

Date

Parent or Guardian Signature if under 18 years of age