



UPEI PANTHERS
550 University Avenue
Charlottetown, PE C1A 4P3



Congratulations on your decision to participate as a student-athlete at UPEI. There are several items that are important to know before you start your journey at UPEI. They are highlighted in the following section; all forms **MUST** be completely filled out **PRIOR** to tryouts, practices, events. Incomplete forms will be returned to you, which will delay the process. Remember, this process **MUST** be complete before you will be allowed to participate.

Rookie Medical Form/Assumption of Risk/Consent to Receive Medical Care:

This form must be completed by a medical physician for any athlete new to UPEI or returning to UPEI after an absence of two or more years. **MUST** be completed (fully) prior to participating in tryouts, practices and/or events. Print off this form (link is on website) and have it completed and signed by a Doctor. Mail to Carol Hertz, UPEI Panther Sport (address above) OR Fax the completed form to 902-566-0700 OR bring completed form to the first day of tryouts.

UPEI Player Information Form:

To be completed (fully) prior to participating in tryouts, practices and/or events. Print off this form (link is on website) and email to heartz@upei.ca OR mail to Carol Hertz (address above) OR fax to 902-566-0700.

CIS Student-Athlete Registration Form:

To be completed (fully), and the reverse **SIGNED** prior to participating in tryouts, practices and/or events. Print off this form (link is on website) and email to heartz@upei.ca OR mail to Carol Hertz (address above) OR fax to 902-566-0700.

CIS Online Drug Seminar:

To be completed online prior to participating in tryouts, practices and/or events (link is on main page)

UPEI Awards/Scholarships/Bursaries:

All UPEI students may apply; see link on main page. Deadlines apply.

Abbreviated Therapeutic Use Exemption Form:

Athletes with documented medical conditions requiring the *Use of a Prohibited Substance or Prohibited method* must request a therapeutic use exemption using this form. This includes

asthma medications, glucocorticosteroids, plus other substances and methods. This form MUST be completed, signed by a Doctor and submitted YEARLY. Please refer to website for prohibited substances. Mail completed form to Carol Hartz (address above) OR fax to 902-566-0700.

If there are any questions on any aspect of this letter, please contact your coach.