



DANA HILLS HIGH SCHOOL



WWW. DANAHILLSATHLETICS.COM

2021-22 ONLINE ATHLETIC CLEARANCE

INSTRUCTIONS

CHECK LIST

1. Visit www.athleticclearance.com
2. **Review** the tutorial video for a quick reference instructional guide.
3. **Create and account.** Click the “Register” button if you do not have an account. Provide a valid email address and password. *Note: It is important that you include a valid email address. Email verification is required prior to registration.*
4. Once you create an account, you will receive a code (via email or on screen). Enter this code to continue the process. *Please check your junk/spam folder if you did not receive the confirmation email.*
5. Now **LOGIN** at www.athleticclearance.com using the username and password you created via the instructions above.
6. **SELECT** the “Start Clearance” button (upper left corner) to get started.
7. **SELECT** the year **2021-22 DANA HILLS HIGH SCHOOL**, and also your **first season of sport**.
8. **Section # 1: Student Information**
 - a. **COMPLETE** all required fields.
 - b. **STUDENT ID:** not required
 - c. **INSURANCE** – All athletes are required to have insurance. *(If you would like to obtain insurance, please contact the athletics office for a list of resources.)*
9. **Section # 2: Medical History**
COMPLETE all required fields
10. **Section # 3: Parent/Guardian Information**
COMPLETE all required fields
11. **Section # 4: Signatures**
 - a. **Parent/Guardian Signature:** Initial all forms
 - b. **Student Signature:** Initial all forms
 - c. Click **Submit**
12. **You will receive an email confirmation that you must print out and you and your student sign, verifying you have given your consent to each form. **Please upload the signed confirmation, the physical form and a copy of your insurance card** to the athleticclearance.com website.**

***ATTN Multiple Sport Athlete:** Click all sports that you plan on trying out for.*

UPLOAD ALL 3 ITEMS TO THE ATHLETICCLEARANCE.COM WEBSITE PRIOR TO PRACTICE OR TRYOUTS.

1. SIGNED - CONFIRMATION PAGE BY STUDENT AND PARENT
2. SIGNED - PHYSICAL FORM SIGNED BY DOCTOR AND PARENT. ALSO, DOCTOR’S OFFICE STAMP IS ON THE FORM.
3. COPY OF INSURANCE CARD