

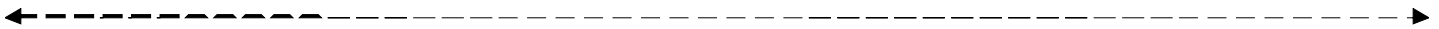
Dear Parent(s):

August 30, 2011

Intramural Season I includes Girls Lacrosse for grades 5-6. It will run every Monday, Wednesday and Thursday beginning Monday, September 12<sup>th</sup> and ending Monday, October 24<sup>th</sup>.

Bus transportation will be provided each day. Buses will leave Sand Creek at 3:35 p.m. These buses run a "skeletal" route through our neighborhoods, making fewer stops which may not be as close to home as the normal school bus stop for your child. **\*\*In case of inclement weather, cancellation of intramurals will be announced at the end of the school day. Students must listen for the announcements.\*\***

Please complete the bottom portion of this letter and return it to your child's homeroom teacher by Monday, September 12<sup>th</sup>. **It is important that you fill out the emergency information in order for your child to be included in the program.**



I give permission for \_\_\_\_\_ in grade \_\_\_\_\_ to participate in Girls Lacrosse Intramurals after school on Mondays and Thursdays.

\_\_\_\_\_ Date \_\_\_\_\_ Parent Signature

**SPORTS EMERGENCY INFORMATION:**

HT \_\_\_\_\_ WT \_\_\_\_\_ D.O.B. \_\_\_\_\_ Contact Lenses Y \_\_\_ N \_\_\_

**MEDICAL CONDITIONS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMERGENCY PLAN:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMERGENCY PHONE NUMBERS:** Mother's Name and Phone #'s \_\_\_\_\_ H

\_\_\_\_\_  
\_\_\_\_\_ C

Father's Name and Phone #'s \_\_\_\_\_ H \_\_\_\_\_

\_\_\_\_\_ C \_\_\_\_\_

Other Name and Phone #'s \_\_\_\_\_ H \_\_\_\_\_

\_\_\_\_\_ C \_\_\_\_\_

