

Intramural Permission Slip

(Gymnastics & Golf use different permission slips)

Program Name_____

I give (name)_____ (grade)_____ permission to participate in the *Intramural* program. I understand that the program will run from **2:20-4:00 pm** on the days scheduled.

- I will arrange for my child's transportation and will insure that he or she is promptly picked up at 4:00 pm in front of the gymnasium.
- My child will take the late bus.

Students will not be allowed to leave early unless accompanied by a parent or guardian. I understand that there is a certain amount of risk inherent in any vigorous physical activity.

In the event of an emergency, I can be reached at:
Phone_____

If I cannot be reached, I give my permission for emergency first aid treatment.

Parent/Guardian

Signature:_____ Date:_____

**Please return to Mrs. Casinghino
Intramural Coordinator**