

ST. ROBERT'S SPORTS PARTICIPATION PERMISSION SLIP 2011 - 2012

Thank you for your participation in the 2011 – 2012 St. Robert's Sports program.

Permission slips AND checks are to be returned to Rachelle Henley ~ St. Robert's Athletics by Friday, October 21st by noon.

1. The number of teams that St. Robert's will sponsor in the Peninsula Parish and School League (PPSL) is predicated on the number of student athletes that participate.
2. Participants will be evaluated and placed on teams best suited to their ability.
3. Once permission slips are completed and submitted, children are obligated to participate in the entire program and season, all practices and games. Exceptions to this policy are illness or academic probation.
- 4. WE WILL NOT REFUND PARTICIPATION FEES FOR ANY REASON.**

Parents are responsible to provide on-time transportation (drop-off and pick-up to all practices and games).

Please read your St. Robert's School Sports Program Handbook which can be found at www.saintroberts.org (click on Parish Athletics) for additional information about St. Robert's Athletics.

**\$75.00 Participation Fee
\$50.00 Facility Fee (per sport per participant)**

MAKE CHECKS PAYABLE TO: ST. ROBERTS ATHLETICS

PLEASE PAPERCLIP YOUR PAYMENT TO THE ST. ROBERT'S SPORTS PARTICIPATION PERMISSION SLIP 2011 – 2012 ~ THANK YOU!

ST. ROBERT'S SPORTS PARTICIPATION PERMISSION SLIP 2011 - 2012

Permission slips AND checks are to be returned to the school Attn: Rachelle Henley ~ St. Robert's Athletics by Friday, October 21st by noon.

Sport your child will be participating in (check ONE):

- Girls Basketball \$125.00 per participant (\$75.00 Participation Fee + \$50.00 Facility Fee)**
- Boys Basketball \$125.00 per participant (\$75.00 Participation Fee + \$50.00 Facility Fee)**

****Athletic Financial Scholarships are available for families with more than one child participating in the sports program at the same time. Please contact Father Obet to apply.**

I, _____ give my child _____ permission
(Print Your Full Name) (Print Your Child's First and Last Name)

to participate in St. Robert's Sports program. **CURRENT** Grade: _____

Home Phone # _____ e-Mail address: _____

Your signature acknowledges that you have read and understand the policies and guidelines in this document and the St. Robert's School/Sports Handbook.

Signature: _____ Date: _____
(Parent or Legal Guardian)