



## Calvary Episcopal School Athletic Program Information: 4<sup>th</sup> - 7<sup>th</sup>

Please read carefully. Sign and return the attached permission slip/release form to school BEFORE the first practice.

***Please sign and return a separate form for each student athlete and each individual sport they are participating in.***

BEFORE participating in any practice or contest in interscholastic athletics, students are REQUIRED to have the following:

- 1. signed permission slip/release form**
- 2. current sports physical on file at school**
- 3. appropriate practice clothing (sneakers, cleats, shorts, sweats, etc)**

As part of our on-going safety efforts, the following procedures have been put in place regarding sports (practices and games).

- **Golf-** A fee of \$50, payable on or before the first practice day to Calvary Episcopal School
  - Parents are responsible for equipment including (golf clubs, golf tees, school polo shirt)
  - Parents will need to pick students up from school and transport their athlete(s) and their equipment to the golf course on designated practice days. Practice days will be Wednesdays from 3:15-4:00 at ColoVista Golf Club.
  - Address is 265 Colovista PKWY, Bastrop TX 78602
  - Phone # (512) 629-4585
  - Practice Dates: Mar. 1, Mar. 8, Mar. 22, Mar. 29, Apr. 12, Apr. 19, Apr. 26.
- **Pickleball-** A fee of \$25, payable on or before the first day of practice to Calvary Episcopal school
  - Parents may pick athletes up from school and transport to Fisherman's park courts or a coach/volunteer will walk with students to Fisherman's park after school on designated practice days. Please pick up students promptly after practice at the Fisherman's Park courts or a coach/volunteer will walk students back to campus in the event they stay for aftercare.
  - Practice days will be Tuesdays from 3:15-4:00. Please circle below how your child will get to and from practices:
  - Address is 400 Farm Street, Bastrop Tx 78602
  - Phone # (512) 332-8800
  - Practice Dates: Feb 28, Mar. 7, Mar. 21, Mar. 28, Apr. 4, Apr. 11, Apr. 18, Apr. 25

To practice	From practice
-pick up and transport	-pick up from courts
-walk with coach/volunteer from school	-walk to campus for aftercare with coach/volunteer

\*Notice - Coaches will ask for a form of identification from anyone other than parent/guardian when picking up athletes.

Sport: \_\_\_\_\_

## PERMISSION SLIP/RELEASE FORM FOR PARTICIPATING IN SPORTS

Parent/Guardian Statement:

I approve of my athlete participating in the Calvary Episcopal School athletics program. I will not hold Calvary Episcopal School or its employees and volunteers responsible for any injury sustained while engaging in any practice or game or while traveling to or from practices or contests.

**I give permission for \_\_\_\_\_, grade \_\_\_\_\_, to participate in all TEAM practices and events held during the school year in the sport of \_\_\_\_\_.**

I recognize that such activity involves the potential for injury, which is inherent in all sports. I acknowledge that even with the best coaching, use of appropriate protective equipment and strict observance of rules, injuries are still a possibility. Having been so warned, it is still my desire that my child participate in this sport.

Parent / Guardian signature \_\_\_\_\_ Date \_\_\_\_\_

Athlete signature \_\_\_\_\_ Date \_\_\_\_\_

Parent / Guardian Email address: \_\_\_\_\_ (optional)

## RELEASE FORM

STUDENT NAME: \_\_\_\_\_

Parent/Guardian Name	Home Number	Work Number	Cell Number

Please list individuals authorized to pick up your child from practices/games.

NAME	Relationship to Child	Address	Telephone	Alternate #
1.				
2.				
3.				

Parent/Guardian	Signature:
Date:	