## Volleyball Intramural



Who?: 6<sup>th</sup>, 7<sup>th</sup>, and 8<sup>th</sup> graders

## When?:

- There will be an informational meeting in the gym on **Friday, January 10** at **7:15am**. Please <u>bring a charged Chromebook</u> and friends!
- A detailed schedule will be posted on the Volleyball Intramural page on the WJHS website at the start of each week. **Students are responsible for checking this schedule weekly.**
- Volleyball Intramural will run from **7:00-7:45 am**.

## **Dates:**

**January** 10, 14, 16, 21, 23, 28, 30 **February** 4, 6, 11, 13, 18, 20

Where?: Gym (enter door 4)

## What?:

- Turn in a signed permission slip (below) and a one-time intramural fee of \$26 to the front office. (If paid by check, please make it payable to Naperville School District 203.)
- Volleyball knee pads (optional)
- Bring your friends!

Student Name:  Grade: 6 7 8  Name:  Phone Number:  I give permission for my son or daughter to participate in Intramural Volleyball at WJHS. In signing this permission slip, I understand that in case of accident or loss, we will not hold the school or any of its employees liable for such damage or loss.  I understand that my child will not be able to access medications that are in the health office. District policy does not allow students to carry any medications during the school day. A student may self-carry an albuterol inhaler or an epinephrine auto-injector with the proper documentation on file in the health office. For other medications, please plan to have a responsible adult bring the medication to practice/sporting event. If you have any questions at all about medications needed for after or before school activities, please contact the coach/supervisor as soon as possible.	Questions?	
Rade: 6 7 8 Name:	See Mrs. Pate or Mrs. Pellegrino	
Phone Number:	Student Name:	- •
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Parent / Guardian Signature Date  Please list any health concerns:	Parent / Guardian Signature	Date