

September 14, 2023

Dear Parents/Guardians,

Your child has indicated an interest in joining the Coed Soccer Team. We are looking forward to working with your child to develop their soccer skills. To make this a worthwhile and enjoyable experience for all, we have high expectations of those students who play and represent Edgewood.

- Players are ambassadors of our school and community and are expected to:
- have a positive, willing and cooperative attitude
 - follow directions and behave appropriately at all times
 - be punctual and prepared for practices and games by having proper gym attire
 - attend all practices unless they are absent from school

It is also our hope that the students will learn about commitment, discipline, sportsmanship, and perseverance. It is important to note that the players' performance and behaviour during school hours determine their eligibility to participate in extra curricular activities. We are confident that the players will put forth their best effort on and off the field and be a part of a successful team!

Game days will vary starting middle of September. We have after school practices on Wednesdays (2:45– 3:30 p.m.) and Thursdays (2:45 – 3:30 p.m.) unless a game replaces practice. Practices will be held at Edgewood Park and will start September 20th. We will need parent-drivers for our games.

Ms. Stanforth & Ms Terepocki

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Please return this portion signed if you want your child to participate in this activity.

CONSENT AND ACKNOWLEDGEMENT OF RISK

Accidents can be the result of the nature of the activity and can occur with or without any fault on either the part of the student, or the school board or its employees or agents, or the facility where the activity is taking place. By allowing your son/daughter to participate in this activity, you are accepting the risk of an accident occurring, and agree that this activity, as described above, is suitable for your child.

I give _____ (*name of student*) permission to participate in soccer practices and games. I accept the mode of transportation and level of supervision for this activity. I understand that my child may be exposed to certain risks and dangers while participating in this activity and that accidents and injuries may occur.

Signature of Parent(s)/Guardian(s)

Date