October 13, 2023

Dear Parents,

Your child has indicated an interest in joining the Gr. 6/7 Volleyball Team. We are looking forward to working with your child to develop his volleyball 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 court and be a part of a successful team!

We have after-school practices on **Mondays (2:45 – 3:45pm) and Wednesdays (2:45–4:00 p.m.**) Games will be held on Wednesdays. A more detailed game schedule will come out end of October. We will need parent-drivers for our away games.

Please sign the form below and return to Ms. Stanforth by the first practice, October 18<sup>th</sup>. Thank you for your support and cooperation.

	Sincerely yours,
	Ms. Stanforth & Mr. Gill
	ivis. Staniorti & ivii. Giii
Please return this portion signed if y	you want your child to participate in the Volleyball Team.  GEMENT OF RISK
without any fault on either employees or agents, or th your son/daughter to partic	It of the nature of the activity and can occur with or the part of the student, or the school board or its ne facility where the activity is taking place. By allowing cipate in this activity, you are accepting the risk of an gree that this activity, as described above, is suitable for
the volleyball practices and gasupervision for this activity. I	(name of student) permission to participate in ames. I accept the mode of transportation and level of understand that my child may be exposed to certain risks ag in this activity and that accidents and injuries may occur.
I give permission for m	ny child to walk home after practice/games.
	Parent's Signature