***Hazelwood North Middle School***

***Intramural tryout Permission Slip Volleyball Sept 12 and 13 6th and 7th grade and Sept 14 and 15 will be 8th grade tryouts after school until 4:20***

Your daughter is interested in participating in an interscholastic extracurricular activity at North Middle School. Please understand that these activities are of a physical nature and accidents do happen. Please know that the school does not provide insurance and is not responsible for accidents that happen while students are in the activity.

Please send your child with items that would allow him/her to practice inside. All games will be played on Tuesday and Thursday nights, and may be away from the school. Transportation to and from games will be the responsibility of the parent/family. Games will be played at either 5pm or 6pm. Therefore, all students must be picked up by 7:15pm, as the gym doors will be locked at that time. **Students must arrive 30 minutes prior to game time.**

Activity/Practice will end by 4:00pm. Students who normally ride buses may ride the activity bus home. If your child will be going home by private automobile, please be sure that your daughter is picked up by 4:30pm promptly, or your child will not be allowed to participate in the interscholastic extracurricular program.

These activities are provided to enhance the athletic ability of our students while providing them with an opportunity to be team players in a social setting. To be a part of the team is a privilege, so inappropriate behavior and/or ISS/OSS will not be tolerated and may result in suspension or dismissal from the activity. Finally, a “C” average must be maintained by all students.

Please sign the permission slip below and return to:  **8th grade students give to Mrs. Laskowski:, Ms. Berger and 7th and 6th grade.**

I give my daughter permission to participate in the interscholastic extracurricular tryout activity Volleyball at Hazelwood North Middle School. I have read and discussed the above rules/expectations with my child and understand that not following them will result in removal from the activity. I also understand that HSD is not responsible for any accidents that may occur during this activity.

Student Name :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(print) Grade:\_\_\_\_\_\_\_\_\_\_\_

Parent Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please fill out and return with permission slip

North Middle Volleyball Grade & Behavior Sheet

Name: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Week of: TRYOUT GRADE SHEET

Grade: (circle one) 6th 7th 8th Coach: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- |
| **Subject** | **Grade %** | **Comments** | **Has the student complied with all classroom expectations?** | **Teacher****Initials** |
| Ela  |   |    | Y N |   |
| Math |   |    | Y N |   |
| Science |   |    | Y N |   |
| Social Studies |   |    | Y N |   |
| A-Day Elective |   |    | Y N |   |
| B-Day Elective |   |    | Y N |   |
| AE |   |   | Y N |   |

**\* Sheet needs to be turned in every week and signed by all teachers**