

WEST ELEMENTARY 1st GRADERS:

West Elementary Jr. Soccer Club Begins Soon!



1st GRADE SOCCER: Sept. 18th – Oct. 4th

Wednesdays & Fridays: 7:30AM – 8:30AM

SIGN UPS DUE: SEPT. 10th (MAX. 24)

Dear First Grade Parents and Students:

The First grade soccer club will run on Wednesdays & Fridays, starting Wednesday, Sept. 18th and ending on Friday, Oct. 4th. Sessions will begin promptly at 7:30 and end at 8:30 am. Students can be dropped off at the soccer fields in back of West Elementary School. If there is inclement weather, sessions will be held in the Upper Gym. Games will be played in the Upper Gym if there is inclement weather. Sessions will include, warm-up, instruction, skill drills, skill games, and scrimmages. This is a great opportunity for kids to improve social skills, teamwork, confidence, and get active before they start their day! Equipment will be provided and students only need active clothing and sneakers to play. Please feel free to email Tom Gillespie with any questions! Tom.gillespie@andoverma.us

Please return the bottoms of both forms and payment by Tuesday September 10th.

SESSIONS

Wednesday, September 18th

Friday, September 20th

Wednesday, September 25th

Friday, September 27th

Wednesday, October 2nd

Friday, October 4th

The cost of the League is \$60 for 6 sessions

Please make checks payable to *West Elementary School*.

_____ Please return both sides of this form along with payment to the Main Office _____

I give permission for my son/daughter, _____ to join the **First Grade Soccer Club**

Parent Signature: _____

Date: _____

OVER 

WEST ELEMENTARY SCHOOL
Grade 1 Soccer Club

SESSIONS
Wednesday, September 18 th
Friday, September 20 th
Wednesday, September 25 th
Friday, September 27 th
Wednesday, October 2 nd
Friday, October 4 th

Parent Consent for Extracurricular Activities and Medical Authorization

Your child is invited to participate in our extracurricular activity program. It is understood that "extracurricular" refers to those activities taking place before or after school. These programs may include but are not limited to interscholastic sports, intramural sports, and clubs. Participation in these activities is voluntary, but you must give permission before your child can participate. Your signature below grants your permission.

Your child will be supervised by teachers, coaches, and/or volunteer leaders. Every program has certain unavoidable risks attached to it. We cannot enumerate every risk, but we believe that you are generally familiar with these activities and your child; therefore, you are in the best position to decide whether your child should participate. The School Department and principal have approved these activities, but we cannot and do not guarantee that there will be no injuries or damages as a result of participation. Given the nature of some activities, an additional consent form may be required.

By signing this form, you agree that your child may participate in extracurricular activities. By signing this form, you also agree to release the Town of Andover, its School Department, elected officials, employees, and volunteer supervisors from any and all damages, as the result of death and/or injuries of any kind you and your child might suffer as a result of participating in any of these activities, except for those that result from gross negligence or wanton and willful misconduct. This agreement to release does not apply to any independent contractor.

Should it be necessary for your child to have medical treatment while participating in an activity and a parent cannot be reached, your signature gives the school district personnel permission to use their judgment in obtaining medical service for the child and gives permission to the physician to render medical treatment deemed necessary and appropriate. You should understand that the school district has no insurance covering such medical or hospital costs incurred for your child; therefore, any cost incurred for such treatment shall be your sole responsibility.

This is a legal document and you are free to obtain a lawyer's advice at your own expense before signing it. You may not, however, change the language of this form, and any additions or deletions you make to this permission and release are void.

-----Please return this bottom along with First Grade Soccer Club sign up form and payment-----

Event Chosen: **1st Grade West El. Soccer Club**

Student's Name: _____

Parent/Guardian Signature*: _____

Address: _____

Telephone #s: Home - _____ Cell - _____ Work - _____

All sessions are 7:30AM-8:30AM. *(Please try to be there 5 minutes before start)*