



Permission to participate in Oak Meadow's Athletic Program

Student Name: _____

Teacher: _____ Grade: _____

The above-named student has my permission to attend and participate in Oak Meadow's Athletic Program.

Name of Athletic Program: 2017-18 Soccer Program

Participation is to include practices and games (home and away) as specified by the Athletic Director and/or Coach. I understand that practices and games will occur **after** school hours and that my child will be transported to and from the games in the school van by an approved driver.

Contact Person: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Signature: _____ Date: _____



For the Billing Office:

Athletic Program participation for (student name): _____

Sport: Soccer Program

I am including a check for \$200. I wish to be billed for the fee.