

WMS 6th Grade Intramurals

Whitewater Middle School offers a 6th grade intramural program for any 6th grade student that is interested. This program is free and will be offered on various dates throughout the school year. Sessions will begin after school and end at 4:15. Students are welcome to attend as many sessions as they would like.

In order to participate each student must return this form along with the Fayette County School System Parental Consent for Athletic/Extracurricular Participation form. This form is attached to this information sheet. No student can participate until all forms have been completed and submitted. All forms must be turned in by 3:40 September 3rd. No forms will be accepted after that date. We will allow the first 50, 6th grade students that turn in their paperwork to participate. After that there will be a waiting list for other students interested.

The middle school intramural program is an extension of the regular physical education instruction program, including the development skills, health-related fitness, and personal and social responsibility. Intramural programs provide students with a variety of interesting, diverse, and challenging activities to accommodate differing levels of need, skill, readiness, and interests. Intramurals will be predominantly outside and so students must bring their own water bottle.

Attendance is not mandatory and the activities may vary depending on the weather and seasonal athletic events. In the event weather or an athletic event does not permit intramurals, an announcement will be made. If this decision is made during school students will be expected to go home after school by their usual means of transportation.

Students participating in intramurals should be picked up at the gym entrance promptly at 4:15 for afternoon sessions. Students who are not picked up on time will not be permitted to attend future intramural activities. Students who are disruptive or uncooperative may be dismissed permanently from the program. This program is for 6th grade Whitewater Middle School students only and no siblings not meeting that criteria may attend.

If interested please fill out the form below and return to Coach Lyle. If you have any questions or concerns, please contact lyle.dustin@fcboe.org.

Student Name: _____

Homeroom Teacher: _____

Parent's Name: _____

Parent Email: _____

Parent Contact: _____

Student's Special Needs: _____

Parent Signature: _____

FAYETTE COUNTY SCHOOL SYSTEM
PARENTAL CONSENT FOR ATHLETIC/EXTRACURRICULAR PARTICIPATION

*Parents signature needed in four places. Student signature needed in two places

PLEASE PRINT

Name (Last) (First) (Middle) Male Female

Address (Street) (City) (Zip)

The student is domiciled at the above address located in the school attendance area. (School must be notified if student moves from the above address)

The student attended this Fayette County School for at least one full School Year? YES NO

The student lives with (Name of Parent/Parents/Guardian)

Date of Birth Telephone (Home) (Work) (Cell)

Date entered 9th Grade Student's grade level for the upcoming school year

PARENTAL CONSENT FOR PARTICIPATION

WARNING:

- 1. Although participation in supervised inter-scholastic athletics and activities may be one of the least hazardous in which students will engage in or out of school, BY ITS NATURE, PARTICIPATION IN INTER-SCHOLASTIC ATHLETICS INCLUDES A RISK OR INJURY WHICH MAY RANGE IN SEVERITY FROM MINOR TO LONG TERM CATASTROPHIC, INCLUDING PERMANENT PARALYSIS FROM THE NECK DOWN OR DEATH.
2. Although serious injuries are not common in supervised school athletic programs, it is possible only to minimize, not eliminate the risk. Participants can and have the responsibility to help reduce the chance of injury. PLAYERS MUST OBEY ALL SAFETY RULES, REPORT ALL PHYSICAL PROBLEMS TO THEIR COACHES, FOLLOW A PROPER CONDITIONING PROGRAM, AND INSPECT THEIR EQUIPMENT DAILY.
3. By signing this permission form, you acknowledge that you have read and understand this warning. PARENTS OR STUDENTS WHO DO NOT WISH TO ACCEPT THE RISKS DESCRIBED IN THIS WARNING SHOULD NOT SIGN THIS PERMISSION FORM.

I (We) hereby give consent for (student's Full Name): to:

- 1. Compete in athletics and/or extracurricular activities at WHITEWATER MIDDLE SCHOOL of the Fayette County School System.
2. To accompany any school team of which the student is a member on any of its local or out-of-town trips
3. I hereby verify that the information of the physical form is correct and understand that any false information may result in my son/daughter being declared ineligible to participate.
4. Students found illegally enrolled out of their school attendance area could be ruled ineligible.
5. If any emergency medical procedures or treatments are required by the student, I consent to the supervisor(s) taking, arranging for, and consenting to the procedures for treatment in his/her discretion.

We acknowledge that the student is subject to all the rules outlined in the Fayette County School System Student Code of Conduct. This acknowledgement of risk and consent to allow participation shall remain in effect until revoked in writing.

Signature(s) of Parent(s) or Guardian(s) Date
Signature of Student Athlete / Activity Participant Date

INSURANCE INFORMATION

Accident insurance is required in order to participate in athletics and/or extracurricular activities. Please INITIAL one of the following statements regarding insurance coverage for your son/daughter for the school year, then sign below:

My son/daughter is adequately and currently covered by accident insurance that will cover injuries sustained while participating in Interscholastic Athletics / Extracurricular (including, but not limited to, Varsity and Junior Varsity Football).

Initial

Company Providing Insurance:
Name of Insured:
Policy Number:

I wish to purchase the Benefit Plan offered by the Fayette County School System. (A signed copy of this Benefit Plan must be stapled to this form.)

Initial

We acknowledge that unless we purchase the Benefit Plan offered by the Fayette County School System, there is no other school district insurance to cover any injuries, losses or damages resulting from participation in these activities.

Signature(s) of Parent(s) or Guardian(s) Date