

Signature of Parent/Guardian

## **Neshaminy School District**

Carl Sandburg Middle School • 30 Harmony Road • Levittown, PA 19056

Intramural/Activity Participation Form - Fill out one form for EACH activity your child is doing. Bring the completed form to the activity you are doing when it starts.

This form is for parents/guardians to give consent for their child to participate in various intramural/activities at Carl Sandburg. A few of the intramural/activities offered at Carl Sandburg are buddy club, fitness club, flag football, Spirit Club and Swimming. Listen to the morning and afternoon announcements for various intramural/activities, their start dates and times.

If the intramural/activity is over at 4:00pm, your child must be picked up, walk home or take the 4:15pm bus. If the activity ends at 5:00pm your child must be picked up, walk home or take the 5:15pm bus. Your signature acknowledges that you agree to make arrangements for your child to leave the building after their intramural/activity is over.

This is to certify that				has my permission to participate in the listed			
(Student's Name & Grade)				, per	33.011 to pa.	tiopate in the noted	
after school intramural/activity(Name of intramural/activity)				for the		school year.	
					(Year)	<u> </u>	
Please check one of the following: My child has school insurance							
We have adequate insurance coverage for my child							
	rance for my child	e for my child					
Signature of Parent/Guardian Da			Date	Emerge	Emergency Telephone Number		
Main Office 215-809-6220 • Nurse 215-809-6386 • Counseling 215-809-6225							
Naghaminy Cahaal District							
	Neshaminy School District						
Sandburg							
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(Student's Name & Grade)							
after school intramural/activity		(Name of intramura	ul/activity)	for the	(Year)	school year.	
Please check one of the followin	ıσ· Γ	<u> </u>			(Teal)		
Please check one of the following:  My child has school insurance  We have adequate insurance coverage for my child							
I am not concerned about insurance for my child							
	<u>_</u>	I am not cond	cerned about insu	rance for my child			

**Emergency Telephone Number**