



# Our Lady of Peace School

## 2017-18 Student Athletic

### Fee Schedule – GRADES 5-8 ONLY

Family Name: \_\_\_\_\_

<b>OLP CRUSADER ATHLETICS</b>		<b>CROSS COUNTRY</b>	<b>VOLLEYBALL</b>	<b>FOOTBALL</b>	<b>BASKETBALL</b>	<b>TRACK</b>
<b>Sport Season</b>		Aug-Oct	Aug-Oct	Aug-Oct	Nov-Feb	Apr-May

**PLEASE CIRCLE EACH SPORT FEE THAT APPLIES FOR EACH STUDENT LISTED:**

Student Name	Grade					
		\$50	\$100	\$160	\$100	\$50
		\$50	\$100	\$160	\$100	\$50
		\$50	\$100	\$160	\$100	\$50
		\$50	\$100	\$160	\$100	\$50
<b>TOTAL ATHLETIC FEES</b>						

Please note that OLP must inform the respective league of the number of teams for each sport. Late team registration is not allowed and fines will be assessed if a team drops after the registration date. If you have any questions, please contact Mr. Reilly, OLP Athletic Director at [jreilly@olopdarien.org](mailto:jreilly@olopdarien.org).

**PERMISSION TO PLAY ATHLETICS 2017-18 School Year**

I/WE, THE PARENTS OF \_\_\_\_\_ REQUEST OUR LADY OF PEACE SCHOOL TO ALLOW OUR CHILD TO PARTICIPATE IN THE ATHLETIC PROGRAM. WE UNDERSTAND THAT THE SCHOOL WILL ATTEMPT TO PROVIDE REASONABLE SUPERVISION FOR OUR CHILD, HOWEVER, WE UNDERSTAND THAT INJURIES CAN OCCUR; THESE INJURIES CAN, ON RARE OCCASIONS, RESULT IN TOTAL DISABILITY, PARALYSIS, OR DEATH.

IN CONSIDERATION FOR PROVIDING THE OPPORTUNITY TO PARTICIPATE IN THE ATHLETIC PROGRAM AT OUR LADY OF PEACE SCHOOL, I/WE HEREBY RELEASE AND SAVE HARMLESS THE SCHOOL, ITS EMPLOYEES, AND VOLUNTEERS FROM ANY LIABILITY FOR ANY INJURY THAT OUR CHILD MAY SUSTAIN WHILE PARTICIPATING AS A MEMBER OF THE TEAM.

I/WE ALSO AGREE TO INFORM THE SCHOOL OF ANY CHANGES IN OUR CHILD'S MEDICAL CONDITION THAT MAY AFFECT HIM/HER FROM PARTICIPATION ON THE TEAM.

I/WE ALSO UNDERSTAND THAT EACH CHILD MUST HAVE A YEARLY SPORTS PHYSICAL BEFORE THEY WILL BE ALLOWED TO PARTICIPATE IN EITHER PRACTICES OR GAMES.

I/WE ALSO UNDERSTAND THAT I/WE ARE RESPONSIBLE FOR TRANSPORTATION TO AND FROM PRACTICES AND GAMES. WE HAVE READ, UNDERSTAND, AND SHALL ABIDE BY THE ATHLETIC GUIDLINES SET FORTH BY THE OUR LADY OF PEACE SCHOOL BOARD.

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

Please Print Name \_\_\_\_\_