



**FALL 2019 PERMISSION FORM**  
Return to COACH WALKER  
by September Friday, Sept. 20

**PRINT CLEARLY**

**We cannot contact you in an emergency if we cannot read the form.**

Student's First & Last Name: \_\_\_\_\_

Homeroom Teacher & Grade: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Phone #1: \_\_\_\_\_ Text?\*  Yes  No

Phone #2: \_\_\_\_\_ Text?\*  Yes  No

Email address: \_\_\_\_\_

\*Email is our standard form of communication, text messages are sent only for late Cardio Club cancellations or missing emails.

How will your child get home?

Picked up at front of school  KIDZ-U  Walking

Typical day(s) your child will participate:  Monday  Wednesday

Any other relevant information we should know?

**Parent Volunteer?** If you would like to help with Cardio Club, please let us know how

On the field, supervising, handing out sticks, or logging miles  
Day(s) you can help:  Monday  Wednesday

Other (describe below):