

CHICAGO PUBLIC SCHOOLS
DEPARTMENT OF SPORTS ADMINISTRATION
ELEMENTARY SCHOOL SPORTS PROGRAM

PARENTAL CONSENT FORM

Dear Principal:

Student CPS ID#

(NAME OF STUDENT ATHLETE) has my permission to participate in the
Elementary School Sports Program. I am aware that this program requires practice

sessions, tournament participation, and travel. I realize that these activities are

scheduled during the week, after regular school hours, and sometimes on Saturdays. I

understand that _____ will be under the supervision
(NAME OF STUDENT ATHLETE)

of the school coach and is expected to conduct himself/herself properly at all times. I

assure you that he/she will continue to complete all classroom and homework assignments.

Sincerely: _____ Date: _____
(Signature)

Relationship to student Parent Guardian Other _____

Transportation: _____

Emergency phone number: _____

CPS Junior Prep Bowl Chess tournament at Chicago Vocational High School
2100 E. 87th St.

– Sat. Nov. 16 - 8:30am-4:30pm

Each student must have their transportation arranged. I am not allowed to offer rides to any student! If you have any questions or concerns, please contact me at Bateman (773-534-5055), or acgeisler@cps.edu

Thank you, Mr. Geisler