

CHICAGO PUBLIC SCHOOLS  
DEPARTMENT OF SPORTS ADMINISTRATION  
ELEMENTARY SCHOOL SPORTS PROGRAM

# PARENTAL CONSENT FORM

Dear Principal:

\_\_\_\_\_ has my permission to participate in the  
(NAME OF STUDENT ATHLETE)  
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: \_\_\_\_\_ Email address: \_\_\_\_\_

Emergency phone number: \_\_\_\_\_

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**CCF Chess tournament at Rickover Naval Academy**  
**5700 W Berteau Ave, Chicago, IL 60634**  
– Sat. Jan. 18 - 8:30am-4:00pm

**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](mailto:acgeisler@cps.edu)

Thank you,  
Mr. Geisler