

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 COMPETITOR)
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 COMPETITOR)
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: _____

Emergency phone number: _____

CCF Chess tournament at Alfred Nobel Elementary School
4127 W. Hirsch (1400 N)
– Sat. Feb. 29 – 8:45am-3:45pm

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