



# *Irving A. Robbins Middle School Athletics Programming Permission Form*

## • Interscholastic Teams

Irving Robbins teams are open to all students who wish to participate. These are teams that represent IAR in competitive games and meets against other middle schools. Coaches will provide participants with a practice and game schedule and other pertinent information specific to the team. Attendance at team practices and your child's skill development may have an effect on playing time during competitions. **Students are required to have a sports physical on file with the school nurse in order to participate.**

The cost for participation in these activities is **\$75.00 per season**. Checks should be made payable to **Irving A. Robbins Middle School Athletics** and are to be submitted to the IAR main office by **September 5, 2015**. Checks are non-refundable unless a team is unable to reach minimum participation numbers required to fill rosters.

Interscholastic teams begin practice on Thursday September 3, 2015. (2:31 – 4:00)

Late buses begin on Wednesday September 9, 2015.

**Student Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ **Homeroom #:** \_\_\_\_\_

**I give my child permission to participate in the interscholastic program at Irving A. Robbins Middle School.**

**Parent/Guardian Signature:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Emergency Phone #** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Allergies:** \_\_\_\_\_

**Remarks / Other:** \_\_\_\_\_

Please check the activity your child will be participating in.

Cross Country (Grade 7 & 8 Boys & Girls) \_\_\_\_\_

Girls Volleyball (Grades 7 & 8) \_\_\_\_\_

Field Hockey (Grades 7 & 8) \_\_\_\_\_

Please return this form along with a check made out to "Irving A. Robbins Middle School" to the coach of the team you are joining.

Thank you,

**IAR Director of Athletics:**

Mr. Jeff Manaresi

860-677-2683

[manaresij@fpsct.org](mailto:manaresij@fpsct.org)