

Flag Football at Burley

Middle School Sports Program Sponsored by Albemarle County Parks and Recreation

***Return form and \$20 (cash or check made to Albemarle County)
to Mr. Boyd at Burley**

Dates: Tuesday, November 15 - Thursday, December 8, 2016
Tuesdays & Thursdays 4:10pm – 5:15pm
(No session on Thur. Nov 24th, Holiday)

Supervised Scrimmage Flag Football Games. Games will be played after school 4:10pm until 5:15pm. Teams will be Co-ed. Teams will be selected on the 1st day. There are no practices, just games.

Games will be canceled if raining or bad weather. Please listen to afternoon announcement for canceled games.

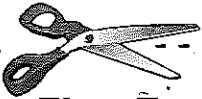
Please Pick-up your children in front of the school after practice. Thanks!

*Questions talk to Mr. Boyd at Burley or call Amy Smith at Parks and Rec. #296-5844

Program Rules & Registration

- ❖ Participants must be a student at Burley Middle School. This program is co-sponsored with Albemarle County Schools & Albemarle County Parks & Recreation.
- ❖ Participants must follow school rules as well as rules set-up by the coach/supervisor.
- ❖ Parents must realize that the coach/supervisor has the authority to suspend any individuals from the program if this action is determined to be in the best interest of the overall program. No refund if the participant is suspended from the program.
- ❖ Parents must pick-up their children by 5:15pm. A late fee of \$15.00 will be charged if pick-up is at 5:30pm or later. This fee must be paid to the coach/supervisor before the participant can return.

(Please return bottom half of form with payment & keep top half for your records.)



Flag Football at Burley Nov. 15 – Dec. 8, 2016

Participant Name: _____ Burley Grade (circle one) 6 7 8

Parent's Email: _____ Home Phone #: _____

Home Address: _____
(Street Address) (City) (Zip Code)

Parent/Guardian Name: _____ Work/Cell Phone #: _____

Parent/Guardian Name: _____ Work/Cell Phone #: _____

Please list any medical conditions that we should know: _____

- ❖ The parent/guardian authorizes the Sports Program to obtain immediate medical care if any emergency occurs when he/she cannot be located immediately. The parent/guardian releases Albemarle County and its officers, agents and employees from liability that might be incurred during the course of the activity.

Parent/Guardian Signature: _____ Date: _____

Amount Paid _____ Cash Or Check # _____