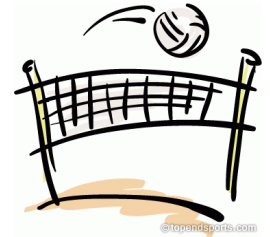


**Intramural Boys' Volleyball** is an opportunity for 7<sup>th</sup> and 8<sup>th</sup> grade boys to learn about the sport of volleyball as well as to develop skills and have fun playing the sport. Practices will take place in the West Gym from 3-4:30pm on: Jan. 18<sup>th</sup>, Jan. 23<sup>rd</sup>, Feb. 6<sup>th</sup>, Feb. 8<sup>th</sup>, Feb. 20<sup>th</sup>, Feb. 22<sup>nd</sup>



If interested, please complete this form and submit any questions to Mrs. Gonnella ([laura\\_gonnella@ipsd.org](mailto:laura_gonnella@ipsd.org)) or Ms. Guide ([jenna\\_guide@ipsd.org](mailto:jenna_guide@ipsd.org)). Students need to have gym shoes and workout clothes to participate. Please change in the locker room and then meet in the West Gym to wait until we begin practice. Please return the signed permission slip as soon as possible because there will be a cap of 24- 7<sup>th</sup> graders and 24-8<sup>th</sup> graders.

Athletic Participation Permit

Gregory Middle School  
District 204

Intramural Boys' Volleyball  
Sport

This form must be completed properly by the parents/guardians and returned to Mrs. Gonnella or Ms. Guide prior to practice.

\_\_\_\_\_  
Name of student

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Grade

\_\_\_\_\_  
Address

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
City, State, and Zip

\_\_\_\_\_  
Mother's Cell Number

\_\_\_\_\_  
Father's Cell Number

Parent's permission -- I approve of my child's request to participate in the Gregory Volleyball intramurals. **Parent's Signature** \_\_\_\_\_