



Don Estridge High Tech Middle School

1798 Spanish River Blvd.
Boca Raton, FL 33431
Phone (561)989-7800--Fax (561)989-7810
Athletics/Intramurals (561)989-7882

Parents' or Guardians' Permission to Participate in Intramural Soccer

Student's Name (please print) _____

Grade _____ Cell Phone _____

Activity: Soccer with Coach Decker

Activity Days: **Tuesdays and Wednesdays through September and October**

Time: **4:15 – 5:30**

Starts: Wednesday, September 4th

Needs: Shin guards and water

I hereby give my consent for the student named above to participate in the intramural Program at Don Estridge High Tech Middle School.

I also understand that I am responsible for providing the above-named student Transportation from school at the appropriate designated time, unless the student walks or rides a bike home.

Signature of Parent/Guardian

Date