

Get Up, Get Out, & Get Moving with Miss Levine @ P.E. Club!

Open to 6th-8th grade students - first come first serve!

PE club provides a new opportunity for students to get out and move with their peers - outside of their typical PE class. This club promotes teamwork, cooperation, & of course physical activity!

Activities may include, but are not limited to: Ultimate Frisbee, Badminton, Ultimate Volleyball, Just Dance, Soccer, Step Aerobics, Kickball, Wiffle Ball, Lacrosse, Pickleball, Speedball, Tchoukball, Handball, Scooter Sports, Capture the Flag, Floor Hockey, Track & Field, Project Adventure Games, Relay Races, Team Building Activities (like Hungry Hungry Hippo), Glow-in-the-dark Activities, and more!

We will be meeting on Thursdays, twice a month throughout the school year
(see reverse for tentative schedule)

PE Club Dues are \$5.00 - CASH ONLY - due at the first meeting. Thursday, 11/01/18

Participant Name: _____ **Grade:** _____

I give permission for my child (named above) to attend the Schuyler-Colfax Middle School PE CLUB. I understand the club meets after school from 3:00 - 4:00pm and I will arrange for prompt transportation as late pick-up will result in *dismissal from the club*. Clubs will not meet when school is not in session!

***Please note: All participants must demonstrate good sportsmanship! Students may be dismissed from PE Club at any time due to misbehavior during PE Class/Club at Miss Levine's discretion. This Club is a privilege, not a right!**

Parents please join REMIND to receive PE Club notifications directly to your phone!
Text this number "81010" this message "@fkhg43" to start receiving

If you have any questions or concerns, please contact Miss Levine via email @ slevine@wayneschools.com

ALL PERMISSION SLIPS MUST BE RETURNED TO MISS LEVINE'S MAILBOX BY FRIDAY, OCTOBER 19th

PLEASE FILL OUT BACK OF PAPER & RETURN





EMERGENCY CONTACT INFORMATION



Student Name: _____ Student Grade: _____

Student D.O.B: ____/____/____ Age: _____ HR Teacher: _____

Student Allergies: _____

Address: _____

Please indicate Parent Pick Up, Walker/Biker: PICK-UP WALKER/BIKER

My child may also ride home with: _____

(No deviations without written instructions)

Guardian Name: _____

Guardian phone: (Cell) _____ (Home) _____ (Work) _____

Guardian Email (please print clearly): _____

Emergency Contact Name/Relation: _____/_____

Emergency Contact #: _____

Parent/Guardian signature: _____

P.E. CLUB* SCHEDULE:

DECEMBER

Thursday, 12/06/18 - 3:00pm - 4:00pm *\$5 is due**

Thursday, 12/20/18 - 3:00pm - 4:00pm

JANUARY

Thursday, 01/03/19 - 3:00pm - 4:00pm

Thursday, 01/17/19 - 3:00pm - 4:00pm

FEBRUARY

Thursday, 02/07/19 - 3:00pm - 4:00pm

Thursday, 02/21/19 - 3:00pm - 4:00pm

MARCH

Thursday, 03/14/19 - 3:00pm - 4:00pm

Thursday, 03/21/19 - 3:00pm - 4:00pm

APRIL

Thursday, 04/04/19 - 3:00pm - 4:00pm

Thursday, 04/25/19 - 3:00pm - 4:00pm

MAY

Thursday, 05/09/19 - 3:00pm - 4:00pm

Thursday, 05/23/19 - 3:00pm - 4:00pm