

## Immaculate Conception School

3285 Cathedral Avenue, Prince George, B.C. V2N 5R2 ♥ Phone (250) 964-4362 ♥ Fax (250) 964-9465 Email: icsoffice@cispg.ca ♥ www.icschool.ca

September 16, 2019

Dear Parents:

Our extra-curricular volleyball program begins in October. This year we will have a boys team consisting of all interested Grade 6 and 7 boys and a girls team consisting of all interested Grade 6 and 7 girls. The boys will practice Tuesdays from 3:00 until 4:15pm and the girls will practice on Wednesdays from 3:00 to 4:15pm.

Mrs. Schenk will be coaching the boys and I will be coaching the girls.

The game schedule will be distributed when it is finalized. The season will finish up with the Knights of Columbus Volleyball tournament in November. We will be playing home and away games against St. Mary's, Sacred Heart and Cedars Christian School. The schedule will also be posted on the school website: www.icschool.ca

As long as the students are completing homework, maintaining their grades, and behaving well, they will be welcome on the team. This will be up to the homeroom teacher's discretion. This slip must be returned on or before September 20th.

Please make sure to inform me if your son or daughter is going to miss a practice or a game. Team players will be provided with a school jersey and shorts at the beginning of the season. These are to be returned to the school at the end of the season. A fee of \$50.00 will be charged for non-return of this uniform. Students must have their full uniform to play in any game. Any undershirts must be white (or from their gym strip).

Our hope is to have parents drive students to away games. Please let us know if you can help with transportation by marking it on the permission slip below. We will confirm with you before the games if you are actually needed to drive on the day.

Just a reminder - you need to have your volunteer driver form, driver's abstract and criminal record check done before driving other children. Please see Mrs. Gamble for more details on this.

Thank you,

W. Hows

Miss Ames

Athletic Director

PLEASE RETURN THIS PORTION TO THE SCHOOL BY September 20<sup>th</sup>.

I give permission for my child, \_\_\_\_\_\_\_\_, to take part in the volleyball program.

Please provide your e-mail address here if you are able to help drive: \_\_\_\_\_\_\_

Signature of Parent/Guardian