**Pacetti Bay Middle School**

**Parent Approval Form Basketball Open Gym and Tryouts**

I,\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby give my consent for

Parent/Guardian Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to attend basketball open gym and tryouts. \_\_\_\_\_\_\_\_\_

Student Name Grade

I understand that if there is a pre-existing health condition, the school/county coaches will not be held liable.

\*Must be returned before tryouts to the basketball coach. **Forms will not be accepted the day of tryouts.**

* Open Gym/Conditioning Dates: 11/16, 11/18, 11/30, 12/2 from 2 – 3:30 pm
* Tryout Dates **GIRLS** = 12/6 and 12/7 from 2 – 4:00 pm
* Tryout Dates **BOYS** = 12/9 and 12/10 from 2 – 4:00 pm

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Parent/Guardian Signature

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