

**PRAIRIE VIEW MIDDLE SCHOOL  
PHONE #708-532-8540  
PARENT/GUARDIAN TRY-OUT PERMISSION SLIP**

**BOYS' BASKETBALL**

**YOUR CHILD HAS EXPRESSED A DESIRE TO PLAY FOR THE PRAIRIE VIEW MIDDLE SCHOOL BASKETBALL TEAM. IF YOUR CHILD SHOULD EARN A PLACE ON THE TEAM, THERE ARE CERTAIN RESPONSIBILITIES REQUIRED OF BOTH THE STUDENT AND PARENT.**

**THE PLAYERS ARE EXPECTED TO BE AT EVERY PRACTICE UNLESS THERE IS AN EMERGENCY OR SICKNESS.**

**ALL ATHLETES ARE EXPECTED TO DRESS NEATLY FOR ALL GAMES DURING THE SEASON. THESE ATHLETES ARE REPRESENTING OUR PROGRAM AND THEIR BEHAVIOR SHOULD BE EXEMPLARY.**

**ALL TRY-OUTS ARE HELD AT PRAIRIE VIEW MIDDLE SCHOOL. I UNDERSTAND THAT SHOULD MY CHILD EARN A PLACE ON THE TEAM, A PHYSICAL EXAM MUST BE ON FILE IN THE OFFICE. THIS PHYSICAL WILL ALLOW YOUR CHILD TO BE ELIGIBLE FOR PARTICIPATION IN ALL EXTRACURRICULAR ACTIVITIES AT PRAIRIE VIEW MIDDLE SCHOOL. YOU DO NOT NEED A PHYSICAL TO TRY OUT.**

**I FURTHER UNDERSTAND THAT NEITHER SCHOOL DISTRICT #140 NOR ITS PERSONNEL ASSUMES ANY RESPONSIBILITY IN CASE AN ACCIDENT OCCURS. THE UNDERSIGNED AGREES TO BE RESPONSIBLE FOR THE STUDENT NAMED BELOW.**

**I HEREBY GIVE MY CONSENT FOR MY CHILD TO TRY OUT FOR THE BASKETBALL TEAM.**

-----  
(DATE)

-----  
(STUDENT NAME)

-----  
(PARENT/GUARDIAN SIGNATURE)

**GRADE LEVEL-CHECK ONE**

----- 6TH -----7TH -----8TH

**PRAIRIE VIEW MIDDLE SCHOOL  
PHONE #708-532-8540  
PARENT/GUARDIAN TRY-OUT PERMISSION SLIP**

**BOYS' SOCCER**

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**I HEREBY GIVE MY CONSENT FOR MY CHILD TO TRY OUT FOR THE SOCCER TEAM.**

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(DATE)

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(STUDENT NAME)

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(PARENT/GUARDIAN SIGNATURE)

**Grade Level**

**What position are you interested in trying out for?**

**(Select all that apply)**

\_\_\_ 6th \_\_\_ 7th \_\_\_ 8th

\_\_\_ Goalie \_\_\_ Defender \_\_\_ Midfielder \_\_\_ Forward

**PRAIRIE VIEW MIDDLE SCHOOL  
PHONE #708-532-8540  
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**BOYS' VOLLEYBALL**

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**I HEREBY GIVE MY CONSENT FOR MY CHILD TO TRY OUT FOR THE VOLLEYBALL TEAM.**

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(DATE)

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(STUDENT NAME)

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(PARENT/GUARDIAN SIGNATURE)

**GRADE LEVEL-CHECK ONE**

----- 6<sup>TH</sup> -----7<sup>TH</sup> -----8<sup>TH</sup>

**PRAIRIE VIEW MIDDLE SCHOOL  
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**BOYS' SOFTBALL**

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**I HEREBY GIVE MY CONSENT FOR MY CHILD TO TRY OUT FOR THE SOFTBALL TEAM.**

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**PRAIRIE VIEW MIDDLE SCHOOL  
PHONE #708-532-8540  
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**GIRLS' BASKETBALL**

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(STUDENT NAME)

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**PRAIRIE VIEW MIDDLE SCHOOL  
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**PRAIRIE VIEW MIDDLE SCHOOL  
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**CHEERLEADING**

**YOUR CHILD HAS EXPRESSED A DESIRE TO TRY OUT FOR THE PRAIRIE VIEW MIDDLE SCHOOL CHEER TEAM. IF YOUR CHILD SHOULD EARN A PLACE ON THE TEAM, THERE ARE CERTAIN RESPONSIBILITIES REQUIRED OF BOTH THE STUDENT AND PARENT.**

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(DATE)

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(STUDENT NAME)

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**GRADE LEVEL-CHECK ONE**

----- 6TH -----7TH -----8TH

**PRAIRIE VIEW MIDDLE SCHOOL  
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**CROSS COUNTRY**

**YOUR CHILD HAS EXPRESSED A DESIRE TO RUN FOR THE PRAIRIE VIEW MIDDLE SCHOOL CROSS COUNTRY TEAM. IF YOUR CHILD SHOULD EARN A PLACE ON THE TEAM, THERE ARE CERTAIN RESPONSIBILITIES REQUIRED OF BOTH THE STUDENT AND PARENT.**

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(DATE)

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(STUDENT NAME)

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**PRAIRIE VIEW MIDDLE SCHOOL  
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**TRACK**

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