

7th/8th Grade Girls' Basketball Registration

If your daughter is interested in playing Middle School Basketball, you must attend the mandatory parent meeting on December 12th. Registration will begin at 5:45 and the meeting will begin at 6:00 pm in the MS LMC (library).

Please print and fill out the Parent Commitment form below and bring it with you to the meeting.

In addition, you must have the following items on file with the school:

1. Concussion acknowledgement
2. Physical card or alternate year card

If you are not sure if your daughter has a physical on file, you may call the athletic secretary, Laurie Gulbranson, at 788-7618.

The concussion acknowledgement, physical papers, and alternate year card can be picked up in the high school office or found at the following link:

<http://www.littlechute.k12.wi.us/schools/ms/msaa.cfm>



Basketball Parent Commitment

In order for the Little Chute Middle School Programs to be successful, we need the parents of our athletes to be involved in supporting our programs. We need your support in the stands cheering on the athletes as well as working shifts in the concession stand that helps fund our programs. **All families are required to work a shift in the concession stand during the season.** You will not be scheduled to work at the same time your child is scheduled to play. In the event that you cannot work the assigned shift it is your responsibility to find someone to trade shifts with or someone to cover your shift. Do not assume that someone else will volunteer to cover your shift.

We also need parents to remind our student-athletes to take care of their uniform. If the uniform is returned with stains and/or rips or tears, your family will be charged a fee of \$50.

Thank you in advance for your help. Your coaching staff, athletes and the Little Chute Middle School Athletic Association appreciate all that you do to make our program successful.

Parent Commitment Acknowledgement

I do agree to support the Little Chute Middle School Athletic Program in a positive manner. I will exhibit sportsmanship toward opposing players and fans and will direct my comments toward the home team in a positive way. I will do whatever possible to promote an atmosphere that will allow all athletes the ability to compete with confidence. I further agree to work a shift in the concession stand to help the program remain successful. I understand that it is my duty to find a replacement in the event that I cannot work my assigned shift.

Parent/Guardian signature

Date

Parent Name (please print)

(Phone number)

Athlete Name (please print)

(email)

If there are any special circumstances that we need to be aware of in scheduling your shift, please issue your requests below:

***This form must be returned to your athlete's coach before uniforms will be distributed.

***Your signature indicates that you have read and agreed to the conditions in the Coaching Philosophy and Expectations handout.