

Waldorf School of Princeton Sports Program Enrollment Form

I, _____, hereby give permission for my child, _____, to participate in the Waldorf School of Princeton Sports Program. I agree to pay the program fee which will be billed through the school bookkeeper at the beginning of each season. I will be responsible, or will make prior arrangements, for my child's transportation to and from all practices, meets and games.

2009 Cross Country (grades 5-8) \$150

- September – October
- Practices Monday, Tuesday and Thursday until 4:30
- Schedule for meets is posted on our website

2009-10 Basketball (grades 6-8) \$250

- Princeton Theological Seminary, Whiteley Gym
- Regular Practice times at the gym:
 - December 2 - February 10:
 - Mondays (3:30-5:00) and Wednesdays (2:45-4:15)

2010 Tennis (grades 5-8) \$100

- Mid-April - June
- Mondays (girls) and Tuesdays (boys) until 4:30

My child's sports medical is on file: **Yes** _____ **No** _____

Note: Students require a sports physical each year.

In case I need to be reached, my contact information is:

Phone: _____ Email address _____

Signed _____ Date _____