



## ST. MARY'S SCHOOL

8909 Mary Street, Chilliwack, BC V2P 4J4

Tel:604-792-7715; Fax: 604-792-7031

[www.saintmarysschool.ca](http://www.saintmarysschool.ca)

November 2021

Dear Parents/Guardians:

Your child has expressed interest in being a part of the Grade 4/5 Boys' Triple ball team for this fall season. Triple ball is a form of volleyball, but it has slightly different rules which encourage passing and having more students make contact with the ball. Practices will be on **Wednesdays** from 3-4pm in the gym and these will start next week on Wednesday, November 10. Practices are closed to spectators at this time; please meet your child in front of the gym at 4pm for pick up.

Another permission form will be sent home as soon as a games' schedule is made available by the district. All games will be played away, as we do not have gym availability for home games. Most games will be scheduled for 3 – 4pm. We will have one or two games before the Christmas break and the remainder of the games will be played when we return in January. The last game will be scheduled for the first week of February. If your child is only able to make practices, that is fine but please let me know so we can ensure there are enough athletes for games.

**In order to participate in Triple ball games, each athlete needs to commit to weekly practice.** Please discuss this commitment with your child before signing this permission form. We need to ensure that we have enough students to play games in the league for our entire season.

**Please note that only children who are in good standing in the classroom, gym, on the playground and on the bus (getting work done, following directions of teachers and supervisors, etc.) will be permitted to participate in games. Classroom teachers, playground supervisors and bus drivers will be consulted to determine whether or not a child is able to participate.**

I am looking forward to the upcoming season!

God Bless,  
Miss Gillespie

I give permission for my child \_\_\_\_\_ to attend Triple ball practices on Wednesdays from 3-4pm.

In case of emergency, I can be reached at (phone number) \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date of Signature

\_\_\_\_\_  
Printed name of Student

**This risk form is for Grades 4/5 Boys' Triple ball  
Please initial EACH item in the "Initial" box provided:**

Item:	Initial:
I have reviewed all safety and behavior expectations with my child.	
I am aware and understand that the ratio of students to adult supervisors is no greater than 15 to 1.	
I am aware and understand that the participation in this activity involves inherent risks, dangers and hazards which may result in serious personal injury or death or other loss or damage to property.	
I am aware and understand that my son/daughter will not be under direct visual supervision the entire time (e.g., washroom) but will always be under indirect supervision. I understand that Miss Gillespie, or another coach will make decisions for my child while he/she is under her care.	
Listed here are any injuries, illnesses, medical conditions (including allergies), or special needs which my child has which may affect participation in this field trip: _____ _____ _____	
Both my son and I understand that the St. Mary's School rules apply at all school sporting events. Any inappropriate student conduct will result consequences, which may include suspension from school. Students engaging in these behaviors may be sent home at their family's expense.	
Accidents can be the result of the nature of the activity and can occur, with or without, any fault on either part of the student, or CISVA or its employees or agents, or the facility where the activity is taking place. I agree that, by allowing my son/daughter to participate in this activity, I am accepting the risks of an accident occurring, and agree that this activity, as described above, is suitable for my child.	

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date of Signature

\_\_\_\_\_  
Printed name of Parent/Guardian