

Roller Skating Permission Slip

Dear Parent or Guardian,

Beginning on March 13th – March 31st, our Physical Education classes will be participating in an in-house skating program. The skates will be delivered directly to the school. **Due to insurance purposes, we will be exclusively using Skatetime's skates.**

This skating unit is being implemented because of its emphasis as a 'Lifetime Activity'. Skating provides a variety of benefits, which include balance, coordination, motor skills, and a top rated cardio-respiratory workout. Students will also learn basic skills such as starting, stopping, forward skating, backward skating, cornering, and a number of safety tips for being a smart skater.

The fee for this unit will be **\$11.00** per student.

The fee includes delivery and pickup of the equipment as well as the use of the skates for 5 days of skating during normal P.E. Class. The \$11.00 fee will be billed through the FACTS system and can be paid online if desired or send skating fee money (checks payable to St. Vincent de Paul School) to the school office.

Please have your child return the bottom portion of this permission slip to their homeroom teacher no later than **Friday February 10th**.

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In consideration of the permission granted I hereby grant permission for the person named herein to participate in the program described and associated activities provided by Skatetime School Programs® and St. Vincent de Paul Catholic School and the Catholic Diocese of Peoria.

I further release Skatetime School Programs® and the Catholic Diocese of Peoria its agents, employees, and volunteers from all actions, damages, claims, or demands and all liability, which might be incurred during the conduct of this activity.

I further authorize the school officials to take the proper steps to provide medical attention should participant be injured while participating or being transferred to or from any school sponsored activity and I hold said officials of St. Vincent de Paul Catholic School and the Catholic Diocese of Peoria harmless thereof.

I acknowledge the risk and responsibilities involved in this activity. I have read this release and understand all its term and execute it voluntarily and with full knowledge of its significance.

ACTIVITY: Skatetime School Programs® (In-House Skating Program) **HR Teacher:** _____

Name of Student Participant: _____ Male Female

My child's shoe size is (circle one): J8 J9 J10 J11 J12 J13 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

Amount: Quad \$ 11.00 this fee will be billed through the FACTS system and can be paid online. If paying by check please make checks payable to St. Vincent de Paul Catholic School

Signature of Participant _____

Signature of Parent/Guardian _____

(If participant is under age 18 as of date of activity)

****Please feel free to send elbow, wrist or knee pads and bicycle helmet if your child has these at home.**