

Argyle Middle School's Intramural Program

Hockey/Basketball

WHO: Sixth, Seventh and Eighth Grade Students

WHAT: Floor Hockey and Basketball (alternating days)

WHEN: 2:45-4:15 PM on Tuesdays, Wednesdays and Thursdays
Please see the chart below for specific dates.

WHERE: The practices will be held on Argyle Middle School's gym.

COST: All middle school students who voluntarily participate in after-school sports or clubs must pay the Extracurricular Fee (ECA) before the activity begins. Please mail your payment to MCPS, do not send the payment to Argyle Middle School. You may pick up an ECA form from the main office or the bulletin board in the main gym.

Also, if you have a financial obligation at Argyle Middle School it must be paid before you may begin participating in this activity. Please see Mrs. Mein to make this payment.

The students must report to the assigned location by the start time. Students who are not present at the start time will not be permitted to participate. Participants are expected to follow the instructor's directions. Failure to do so will result in elimination from the program. Space may be limited, so return the registration form to Ms. Dalius as soon as possible.

DAY	DATE	TIME	LOCATION	ACTIVITY
Wednesday	11/5/08	2:45-4:15 pm	Argyle M.S.	hockey
Thursday	11/6/08	2:45-4:15 pm	Argyle M.S.	basketball
Tuesday	11/18/08	2:45-4:15 pm	Argyle M.S.	hockey
Wednesday	11/19/08	2:45-4:15 pm	Argyle M.S.	basketball
Tuesday	12/2/08	2:45-4:15 pm	Argyle M.S.	hockey
Wednesday	12/3/08	2:45-4:15 pm	Argyle M.S.	basketball
Tuesday	12/9/08	2:45-4:15 pm	Argyle M.S.	hockey
Wednesday	12/10/08	2:45-4:15 pm	Argyle M.S.	basketball
Thursday	12/11/08	2:45-4:15 pm	Argyle M.S.	hockey

Hockey/Basketball

Student's Name _____ Male Female

Student's Grade _____ Phone Number _____

I give permission for my child to participate in the after school intramural activity program at Argyle Middle School. I have indicated below the manner in which my child will be transported home.

_____Activity Bus _____Walk _____I will pick my child up _____ Other

PLEASE NOTE...Failure to pick up your child on time will result
in his/her elimination from the program.

Parent/Guardian Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

*When the parents are divorced and have legal joint custody, both parents must sign.