



November 25, 2011

Dear Parent/Guardian,

Congratulations! Your daughter has made the volleyball team! Being a member of a school team is a privilege and requires a large commitment on behalf of your daughter. Students are expected to attend all practices, meetings, and games.

Attached is a schedule for the season. Please note that dates for games and practices may change occasionally and your daughter will be notified of any changes. Please be aware that if a student misses a practice before a game she may not play in that game. In addition, if a student misses three unexcused practices they will no longer be a part of the team.

On game days, students are not excused from classes without permission from their teachers. Teachers reserve the right to hold a student back from an athletic event for academic reasons.

Students are able to purchase an Elmwood tracksuit to help ensure that they will be appropriately attired and easily recognizable when traveling to other schools for competition. This can be purchased from the Eagles' Nest on Tuesdays between 3:15-4:15 p.m. On game days, students must be dressed in either their regular uniform or their Elmwood tracksuit. Students will be provided with a team uniform. If the uniform is not returned at the end of the season, the school will charge the student's account for the cost of the uniform. We will take a bus to all away games; parents may drive their daughter home from away games, but please advise the coach of this arrangement.

During games, all attempts will be made by the coach to play everyone equally on the team. However, the coach has the right during close games and the playoffs to determine playing time. Athletes must obey the rules, play in a non-threatening manner, use appropriate language, respect the referees and coaches, and represent their school in a positive manner.

Please discuss with your daughter the commitment required for this team, then sign and complete the permission form. Return only the signed portion of the form and keep the rest of the information as a reference. The forms need to be returned to the coach by Tuesday, November 29<sup>th</sup> in order to play in the first game.

We are looking forward to a great season and hope to see you at some of our games! If you have any questions please feel free to contact us via email at [tstirling@elmwood.ca](mailto:tstirling@elmwood.ca) or [mpurran@elmwood.ca](mailto:mpurran@elmwood.ca).

Sincerely,

Teresa Stirling  
Head Coach

Malek Purran  
Manager

**SR GIRLS VOLLEYBALL SCHEDULE 2011-12**

Monday	Tuesday	Wednesday	Thursday	Friday
NOV 21 TRYOUT/ PRACTICE 4 – 5:30	22	23 PRACTICE 4 – 5:00	24	25
28 PRACTICE 4 – 5:15	29 AWAY GAME @ CARINE WILSON 4PM	30 PRACTICE 4 – 5:15	DEC 1 HOME GAME VS. RIDGEMONT 4PM	2
5 PRACTICE 4 – 5:15	6	7 PRACTICE 4 – 5:15	8 HOME GAME VS. DESLAURIER 4PM	9
12 PRACTICE 4 – 5:15	13 AWAY GAME @ SIR WILFRID LAURIER 4PM	14 PRACTICE 4 – 5:15	15 AWAY GAME @ BROOKFIELD 4PM	16
19 HOME GAME VS. LESTER B PEARSON 4PM	20	21	22	23
26	27	28	29	30
JAN 2	CHRISTMAS HOLIDAYS			5
9	10 PRACTICE 4 – 5:15	11 PRACTICE 4 – 5:15	12 HOME GAME VS. SIR WILFRID LAURIER 4PM	13 AWAY GAME @ ST. MATT 4PM
16	17 HOME GAME VS. BROOKFIELD 4PM	18	19 PRACTICE 4 – 5:15	20 ST.PAT'S Tournament? (FRI & SAT)
23	24	25	26 PRACTICE 4 – 5:15	27
30	31 PRACTICE 4 – 5:15	FEB 1 AWAY GAME @ RIDGEMONT 4PM		



**SENIOR VOLLEYBALL 2011 – 12**

**Elmwood School Parent/Guardian Consent and Release Form**

\*\* In the case of joint custody, BOTH parents must sign this Consent/Release form \*\*

**MEDICAL INFORMATION and EMERGENCY CONTACT INFORMATION**

Student: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Month Day Year

Family Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Medical Condition(s): \_\_\_\_\_

Medication(s): \_\_\_\_\_

Allergies: \_\_\_\_\_

Ontario Health Card Number: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**CONSENT TO PARTICIPATE & TERMS OF PARTICIPATION**

By my signature below, I give my daughter of SLG/Homeroom \_\_\_\_\_ permission to be a member of the Senior Volleyball team. As a member of the team, I give her permission to attend all practices, games and tournaments.

I understand that all of Elmwood School’s rules and policies (see Handbook) as well as any rules and directives established by those leading the trip remain in full force and effect for the duration of the trip.

By my signature below, I acknowledge and agree that I am solely responsible for any costs arising out of my daughter’s breach of any of Elmwood School’s rules and policies and/or any rules and directives established by those leading the trip and the resultant disciplinary actions, if any, whether occurring prior to or during the trip.

By my signature below, I further acknowledge and agree that in the event that my daughter breaches any of Elmwood School’s rules and policies and/or any rules and directives established by those leading the trip while on the trip, Elmwood School may in its absolute discretion require that my daughter immediately return home and any expenses related to such a return (including without limitation travel, including travel of an adult to accompany my daughter, and any outstanding trip expenses) will be my sole responsibility.

**RELEASE AND INDEMNITY**

In consideration of my daughter being permitted to participate on the Senior Volleyball team, I do for myself, my daughter, my spouse and our respective heirs, executors, administrators, successors and assigns, agree as follows:

I acknowledge and accept that participation in the season may expose my daughter to unspecified risks and hazards, which are inherent in such trips, including without limitation, the method of transportation for the trip, all of which I expressly and voluntarily assume.

By my signature below, I do for myself, my daughter, my spouse and our respective heirs, executors, administrators, successors and assigns, hereby RELEASE, WAIVE AND FOREVER DISCHARGE Elmwood School Inc. and its respective officers, partners, agents, employees, servants, representatives, successors and assigns (“the Releasees”) OF AND FROM any and all actions, causes of actions, complaints, demands and claims whatsoever in existence prior to on or after the date hereof whether in law or in equity, in respect of death, injury, loss or damage to my daughter’s person or my person or property HOWSOEVER CAUSED, arising or to arise by reason of my daughter’s participation in the activities contemplated herein except to the extent that same are directly caused by the gross negligence of Elmwood School Inc. or its respective officers, partners, agents, employees, servants, representatives, successors and assigns. I FURTHER UNDERTAKE TO HOLD AND SAVE HARMLESS AND AGREE TO INDEMNIFY all the aforesaid from and against any and all liability incurred by any or all of them arising as a result of or in any way connected to my daughter’s participation in the activities contemplated herein.

By my signature below, I also agree and undertake not to make any claim or take any proceedings against the Releasees set out above, or any other person or corporation which might claim contribution or indemnity under the provisions of any statute or otherwise from the Releasees set out above.

**EMERGENCY MEDICAL CONSENT**

In the event of an emergency, Elmwood School requires parental consent in order to consent to the medical treatment or surgery of the student. Elmwood School will use reasonable efforts to contact the parent(s) prior to consenting to medical treatment for the student and the parent(s) acknowledge and agree that the need for an immediate decision regarding medical treatment for the student may make such contact impossible.

Accordingly, I, by my signature below, hereby authorize and give my express consent to the Head of Elmwood School, or her delegate, to act in loco parentis and in that capacity to consent to medical treatment or surgery for the student based on the advice of the attending physician who considers immediate medical treatment or surgery to be a necessity.

In addition, by my signature below, I hereby authorize and give my express consent to the Head of Elmwood School, or her delegate, to seek and obtain any and all medical interventions that may be reasonably required to ensure the safety and well being of my daughter while on the trip.

**I have read all of the foregoing carefully and by my signature agree to be bound by all aspects of the foregoing.**

Parent Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

**Please return this form to Ms. Stirling by Tuesday, November 29, 2011**