

Skatetime School Program Permission Slip

Dear Parent/Guardian:

Our Physical Education classes will be participating in an in-house skating program. The skates will be delivered to the school. Due to insurance purposes, we will be exclusively using Skatetime School Programs Skates. Students will NOT be allowed to bring in their own 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 cardiorespiratory workout. Students will also learn basic skating 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**. The fee includes delivery and pickup of the equipment as well as the use of the skates during regular PE classes. **Please pay the fee online on RevTrak.**

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 Lincoln Trails Elementary School. I further release Skatetime School Programs and the Mahomet School District, 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 the participant be injured while participating or being transferred to or from any School sponsored activity and I hold said officials of Lincoln Trails School and the District harmless thereof.

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

Activity: Skatetime School Programs (In House Skating Program)

Name of Student: _____ Male ____ or Female ____

Grade/Letter: _____ **Classroom Teacher's Name:** _____

Print Parent/Guardian Name: _____

Signature of Parent/Guardian _____

*If you would like to sponsor a child needing assistance with the rental fee, please send in a check or cash labeled "Additional skating money to sponsor a Lincoln Trail student."