

# Athletic Registration

## Frank Lloyd Wright Intermediate School



Frank Lloyd Wright Intermediate School will be offering 6<sup>th</sup>, 7<sup>th</sup> and 8<sup>th</sup> grade students the following athletic activities: Cross Country, Boys Basketball, Girls Basketball, Wrestling, Track and Field, Volleyball and Pom Poms. Football is offered exclusively through the West Allis-West Milwaukee Recreation Department. These programs offer a fun learning experience and offer a competitive athletic season.

Students who wish to participate must complete the following requirements:

1. Participating students must have a physical form on file with the athletic director of their school.
2. Each participating student must pay an athletic fee of \$25 and fill out this registration (turn in to Coach or athletic Director). This money will go directly to the athletic program for uniforms, transportation costs, team participation fees, equipment, umpires, referees and officials, and other supplies that are required. Fee's may be paid through Infinite Campus (see attached direction sheet), a check payable to Frank Lloyd Wright Intermediate School, or cash paid to the Coach or Athletic Director).
3. Participating students and their parents must read the Concussion Information Sheet and sign the Concussion Form (see attached).
4. Participating students and their parents must read, sign, and hand in the Athletic Code Form (see attached).
5. Student athletes will receive a Student Handbook from their Coach that outlines particular information about the sport.

If you have any questions please call the FLW Athletic Director: Mr. John Bechard at 604-3445.

### Student Information

**Student Name:** \_\_\_\_\_  
Last Name First Name Middle

**Grade:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_ **Check One:** [ ] Male [ ] Female  
Date / Month / Year

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_  cell  home

**Student Needs** (check all that apply):

My child has medical restrictions. (Please explain) \_\_\_\_\_

My child has dietary restrictions. (Please explain) \_\_\_\_\_

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My child has a Special Education Case Manager. (List Name) \_\_\_\_\_

My child has an IMPACT Case Manager. (List Name) \_\_\_\_\_

**Transportation from practices, home events and meets**

I authorize my child to (please check all that apply): Parents can only transport their own child home after games/meets.

- Walk or bike home at the conclusion of practices or games/meets
- Get picked up after practices and meets/games
- Take the city bus home
- Go to the REACH program
- My child has transportation restrictions. \*Please explain: \_\_\_\_\_

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| <b>Parent / Guardian Information</b> |
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**Parent / Guardian (#1) :**

\_\_\_\_\_

**Relationship to Student:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_  cell  home

**Parent / Guardian (#2)**

\_\_\_\_\_

**Relationship to Student:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_  cell  home

I give my child \_\_\_\_\_ permission to participate in Frank Lloyd Wright Athletic Programs.

- My child has a physical card in the school office.    OR     Physical card attached.
- Athletic fee has been paid via (check one):
  - Infinite Campus     CHECK (enclosed)     CASH (enclosed)
- Signed Concussion Form
- Signed Athletic Code Form

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(Parent Signature)

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(Date)

