

## Saint James School 2023-2024 Basketball Program Permission Slip

Child's Name:	
Grade:	
Mother's/Guardia	n's Name:
Cell Phone Numb	per:
Father's/Guardia	n's Name:
Cell Phone Numb	per:
Home Phone Nui	mber:
Preferred Email 1	:
Preferred Email 2	2:
Please return this c	ompleted form (one per student) to the school office along with:
1) Activity fee:	Boys & Girls in Grades 4, 5, 6 (Developmental & JV programs): \$75.00; Boys & Girls in grade 7 & 8 (Varsity program): \$100.00; Please make checks payable to "Saint James School"
<ul><li>2) SJS Athlete Ch</li><li>3) SJS Sports Hea</li></ul>	
For Office Use Only:	
Date Received	
Health Form on File	
Sports Fee Paid	cash / check number
Character Contract R	eceived