



Lakes District Secondary School

PO Box 3000 Burns Lake, BC V0J 1E0
Telephone (250) 692-7733 Fax (250) 692-4231

Sr Boys Basketball

Practice:

Mondays: 5:00pm – 6:30pm

Wednesdays: 5:00pm – 6:30pm

Must practice to be eligible to play

Individual Games:

December to March

Requirements:

This sheet filled out and signed

\$50 to main office

Basketball shoes

Water bottle

Athletic Wear

School District No. 91 (Nechako Lakes) policy states that the school needs to inform parent/guardians of the inherent risks involved with basketball and the rules that the students should adhere to while on a school trip. All school rules apply (i.e. no smoking, drinking, use of drugs, dress code, etc.) Students must wear a mask while on the bus and follow the COVID 19 guidelines.

If, at any time on this trip your child is found to be breaking school rules or specific rules regarding this trip, they may be required to return home (at the full cost and obligation of the parent/guardian signing the permission slip), as soon as arrangements can be made.

TRAVEL PERMISSION REQUEST

I _____ of _____
(Parent/Guardian) (Student's name)

give permission for my child to voluntarily take part in LDSS Basketball.

Signature: _____

(Parent/Guardian)

MEDICAL INFORMATION

Name of Student: _____

Address: _____

Date of Birth: _____

Care card number: _____

Emergency person: _____ Phone number: _____

Family Doctor: _____ Phone Number: _____

Medical Alerts:

Serious known allergies:

Precautions to be taken:

Known allergies to medications: _____

Allergy injections or drugs currently prescribed: _____

Daily medication required:

Yes

No

Name of drug

1. Diabetes

2. Epilepsy

3. Other

Is there any other information you feel we should know about your child?

Parent Signature: _____