FENCING CLASS FOR GRADES 6-8 HIGHLAND PARK HIGH SCHOOL SPRING 2024 REGISTRATION FORM

Student name (please use a separate form for	each child)	Parent email	
Parent/Guardian #1 Name	Parent #1 phone	Street Address	
Parent/Guardian #2 Name	Parent #2 phone	City	Zip Code
School attended and grade:			
Medical Conditions (Such as asthma)			
Location:			
Our child has our permission to practice and of including Fencing, involves the potential for in advises all students to be adequately covered of the risk inherent in physical activity. Parent in connection with these activities. Parent's si and has a Doctor's approval to engage in physical	jury, and on rare occasions a by hospitalization insurance 's signature indicates that pa gnature also indicates that th	a severe injury or even death may o . Parent's signature on this form in rent will accept financial responsibi	dicates acknowledgement lity in case of injury
The District 113 Extracurricular Code acts to sany of the following violations: 1. Theft or vandalism of any school property, to 2. Use, transfer, sale, distribution, or possessi paraphernalia, or the abuse of prescription/no	unsportsmanlike conduct, se on of tobacco, alcohol, mariji	xual harrassment or any behaior ina	appropriate for a student.
To register, complete this form and return to:			
District 113 Fencing Club Todd Kerschke, Fencing Coach 433 Vine Avenue Highland Park, IL 60035			

Parent signature and date

student signature

Questions? tkerschke@dist113.org