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| <ul style="list-style-type: none"> • Times—4:00 to 5:15 PM Pickup is promptly at 5:15 PM • Tues.-Thurs. League Games • NEW—Wed. Traveling Team Practice | <ul style="list-style-type: none"> • FUN FOR EVERYONE!!! • \$30 Athletic Fee • Begins April 14 th |
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The Community Day Ultimate League (CDUL) is dedicated to furthering the sport of Ultimate Frisbee. Our first priority is teaching [Spirit of the Game](#). Competition is highly encouraged, but never at the expense of having fun or enjoying the sport. Ultimate is a fast paced game played with a Frisbee that has elements of soccer, football, and basketball blended together. Any boy or girl in the 4th thru 8th grades are encouraged to play. Practices and games will be held on Tuesdays and Thursdays for everyone.

- ◆ This year we are adding one day a week (Wednesdays) for a traveling team that will play a few games this spring against other schools and in a middle school tournament on **May 31st**. Any and all players that sign-up are eligible to tryout for the traveling team. The team (between 10 –14 players) must be made up of an equal number of boys and girls.

(Please note that the tournament may add an additional small fee.)

Anyone interested in signing please fill out the attached sheet and return it to the Upper or Lower School office as soon as possible.

If there are any questions, please contact Mr. Lahaye or Mr. Costello at 978-682-6628.



Community Day Ultimate League

CDUL

CDCPS Athletic Department Ultimate Frisbee Permission Form

Name _____ Grade _____ Telephone _____
 Address _____ Cell phone _____
 Parent/Guardian's Name _____
 Emergency Contact Person _____ Telephone _____
 Family Doctor _____ Telephone _____
 Family Medical Insurance _____ Policy No. _____

I understand there is an inherent risk in playing basketball and the range of injury can be minor to severe. It is further understood that in case of injury, the school is responsible only for first aid treatment. I do give permission to CDCPS Staff to seek medical attention if such a time warrants. I also understand that all equipment issued is property of the Community Day Charter Public School and is to be returned within 24 hours of the season close or I will assume the current replacement cost. To my knowledge, my son/daughter have not been treated for any pre-existing medical condition that could be aggravated by participating in interscholastic athletics.

I/We also give permission for my/our child to be transported to and from any athletic event. I understand the department policy will be to provide transportation by school bus or van, but in the event a bus or van is not available, private transportation may need to be used. These vehicles will be driven by responsible adults (parents of athletes or coaches), and they cannot be held responsible for any accident or injury that might occur.

In addition, we acknowledge that Community Day Charter Public School does not always provide transportation to all games and therefore, I may be required to arrange for transportation.

I/We are aware all athletes must meet all academic and behavioral requirements of CDCPS to remain in good standing on CDCPS teams. Any student that does not meet those requirements may be suspended from practices and games due to not meeting those requirements. In certain situations, dismissal from the team could result.

Finally, I am aware that the athletic fee for the entire 2009 season not including the tournament is \$30.00.

I have read the above requirements and the Frisbee Information provided, understand and agree to their terms and will help my son/daughter to carry out his/her responsibilities as a CDCPS student/athlete.

_____ has my permission to participate in Ultimate for the 2009 season and I agree to all of the above requirements.

Parent Signature _____ Date _____