

CHICAGO PUBLIC SCHOOLS  
DEPARTMENT OF SPORTS ADMINISTRATION  
Ogden International High School

# PARENTAL CONSENT FORM

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Dear Principal Staral:

\_\_\_\_\_ has my permission to participate in the  
*(NAME OF STUDENT ATHLETE/PARTICIPANT)*  
high school intramural program.

I understand that \_\_\_\_\_ will be under the supervision  
*(NAME OF STUDENT ATHLETE/PARTICIPANT)*  
of the school coach and is expected to conduct himself/herself properly at all times. I  
assure you that he/she will continue to complete all classroom and homework assignments.

Sincerely: \_\_\_\_\_ Date: \_\_\_\_\_  
*(Signature)*

Relationship to student     Parent     Guardian     Other \_\_\_\_\_

PLEASE COMPLETE AND FORWARD THIS FORM TO THE SCHOOL OFFICE.