**WASHINGTON TOWNSHIP PUBLIC SCHOOLS**

**Co-Curricular Activities Recommendations**

*This electronic attachment includes a summary report, a sign-in sheet and permission slip for the 2019-20 school year. These items are also available in OneDrive for you to manipulate to suit your particular club/activity.*

1. Please check your activity summaries on our website and communicate any changes to Donna Damiani.
2. Advertise your meeting times through postings, Valley 411 and morning announcements. Please email Christine Bodine with morning announcements and Amy Leso and Maddy Kubik for the Valley 411.
3. Copy, distribute, and collect permission slips to participating students. Permission slips may be edited for your particular club; however they must include the official language found in the sample permission slip.
4. Sign-in sheets must be signed, dated, and utilized. **Please send your sign-in sheet to the main office staff daily (by 3:05pm) so that students can be located if needed. This is also for emergency purposes to know who is in the building. The sign-in sheets will be returned to your mailbox at 4pm each day**.

**These sheets will be sent to the Superintendent’s office so they must be completed and submitted on time.**

1. Take note of the report below. **Upon the completion of your club or at the end of the school year**, electronically submit a brief narrative to Jeannine Wernik highlighting the purpose and accomplishments of your activity by utilizing this document.

1. Communicate any concerns you may have with your club/sport to an administrator. Clubs may only be cancelled on an emergency basis and advisors must notify Colleen or A’ndrea before cancelling. There should be no club meetings scheduled on Faculty meeting days, unless prior permission has been granted by Colleen or A’ndrea.

**WASHINGTON TOWNSHIP PUBLIC SCHOOLS**

**Orchard Valley Co-Curricular Report**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Club/Activity Name: |  | | Date: |  |
|  | | | | |
| Advisor Name(s): |  | | School: | Orchard Valley M.S. |
|  | | | | |
| Average Attendance: |  | | students | |
|  | | | | |
| Purpose of Club/Activity: |  | | | |
|  | | | | |
| Club Accomplishments: |  | | | |
|  | | | | |
| Advisor(s) Signature: |  | | | |
| In lieu of teacher signature, please acknowledge that you have completed the above information, by typing your name in the box below. Thank you. | | | | |
| Principal or Designee Signature: | |  | | |
| *The building Principal should forward a copy of this report to Student Services.* | | | | |

**ORCHARD VALLEY MIDDLE SCHOOL**

**CLUB/ACTIVITY SIGN-IN**

**2019-20**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Club Name: | ­­ | | Advisor: |  |
|  | | | | |
| Date: |  | | Activity: |  |
|  | | | | |
| Advisor supervising activity (if different from above): | |  | | |
|  | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Student Name** | **Student Signature** | | **Bus** | **Parent** |
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**ORCHARD VALLEY MIDDLE SCHOOL**

INTRAMURAL PROGRAM ~ PARENT/PERMISSION WAIVER

I give my permission for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

to participate in , realizing that such activity involves the potential for injury which is inherent in all clubs/sports. I acknowledge that even with the best instruction/supervision, use of protective equipment and strict observance of rules, injuries are still a possibility. I acknowledge that I have read and understand this warning.

Student’s Signature Parent/Guardian Signature Date

**ORCHARD VALLEY MIDDLE SCHOOL**

INTRAMURAL PROGRAM ~ PARENT/PERMISSION WAIVER

I give my permission for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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