

2019 KIDS HEART CHALLENGE SIGN UP SHEET

THIS IS A FULL DAY FIELD TRIP. TO BE ABLE TO PLAY, YOU MUST MEET THE FOLLOWING REQUIREMENTS:

2 weeks before the event, your name will be given to deans/counselors who will determine if you are eligible to play. **THERE WILL BE NO changes to eligibility after Feb 15!** You must be **PASSING 5 classes & have NO ATTENDANCE or DISCIPLINE issues!** As of Feb 15th, *you must be in good standing with attendance/discipline/medical clearance up until the day of the event.* (All final decisions are at the discretion of the counselors and deans). If you fall into any or all of these categories, you will not be allowed to play! If that leaves a team with 3 players, the team can play. If it leaves a team with 2 players, the teams is ELIMINATED from the tournament or combined with another team short on players. Field trips are a privilege!

SAVE THE DATE! 3/8/19

Our school is proud to partner with the American Heart Association in the fight against heart disease & stroke! Mark your family calendars NOW for our upcoming **Kids Heart Challenge** event taking place on: **FRIDAY, MARCH 8th**



What is the Kids Heart Challenge? We are hosting a 3 on 3 basketball EXTRAVAGANZA!

- Students can be a part of the activity for a \$10 donation. All forms and ALL \$\$ must be turned in TOGETHER. No \$.....Have someone sponsor you OR your whole team! Ask your teachers!
- All participants will receive an *“American Heart”* T-shirt from the American Heart Association.
- Teams will be made up of **4** players, so get your friends together and form a team today!
- **ONLY 1 Varsity Boy or Girl BASKETBALL PLAYER per TEAM, no more than 2 Rostered B/G Basketball players per team.**
- Set a healthy example for your family and assess your own heart health. <http://mylifecheck.heart.org/>

2019 KIDS HEART CHALLENGE REGISTRATION FORM

Form and Money – paid in full - due by Friday, Feb. 8th @ 2:30pm to PE/Health/Dr Ed

*******NO CHANGES TO ELIGIBILITY AFTER FEBRUARY 15!*******

WE HAVE A MAXIMUM # OF TEAMS THAT CAN PLAY...DON'T GET LEFT OUT!

Team Name: _____ (school appropriate)

(CHECK here) We prefer a non-competitive group, but understand that may not be available.

Team Members (Print clearly):

Player Name:	ID#	Year	PE/Health/Dr Ed Teacher	Shirt size	Dean	Counselor
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Paid in full by **Feb 8th @ 2:30** (\$40.00/team) _____ Cash
 _____ Check (Make payable to American Heart Association)
 _____ (teacher initial) 4 waiver forms collected

PE Dept. Teacher Collected by (teacher signature): _____ Date: _____