

CRISTO REY BROOKLYN DEPARTMENT OF ATHLETICS

710 East 37th Street, Brooklyn, New York 11203

Mr. Matthew Kenny, *Director of Athletics*

mkenny@cristoreybrooklyn.org

914-420-9589



Athletic Permission Slip

By signing this permission slip, you grant your child permission to participate in interscholastic athletics at Cristo Rey Brooklyn High School. Your signature evidences that you accept liability for the participation of your child as a student-athlete at Cristo Rey Brooklyn High School and that you agree to indemnify and hold harmless Cristo Rey Brooklyn, its teachers, its coaches, its sponsors, its governing board, and other participating agents, either jointly or severally, from and against any and all claims, injuries, damages, losses, costs, or causes of action that may arise in connection with this sport.

Details concerning times & location of practice and games will be communicated by the head coach at the start of the season & on a weekly basis. You can also access team schedules at www.cristoreybrooklyn.org.

Fall Sports

- Cross Country
- Girl's Soccer
- Boy's Soccer
- Girl's Volleyball

Winter Sports

- Girl's Basketball
- Boy's Basketball

Spring Sports

- Baseball
- Softball
- Track
- Flag Football
- Club Boxing

Please return this section to Athletic Director; keep top portion for your records

I give (student-athlete's name) _____ permission to participate as a student-athlete at Cristo Rey Brooklyn High School by signing below.

Parent Name: _____

Parent Signature: _____

Date: _____

Parent Contact # : _____

Please indicate any medical conditions coaching staff should be aware of below:
