

INTERMEDIATE FLAG FOOTBALL TRYOUTS



Your son\daughter has expressed interest in trying out for the Flag Football Team. Our first tryout will begin **Tuesday, October 9th**. Subsequent practices will be every Tuesday and Thursday outside on the field. The date for the tournament is October 30th. Tryouts/practices will be from 3:10 to 4:10.

Players must be in good standing to attend the tournament and must attend all practices.

****Attendance is mandatory for tryouts.***

I hereby give permission for _____ to tryout for Flag Football.

_____ (parent\guardian)

___ I will be picking my child at 4:10 on practice nights.

___ My child will be walking home.

___ Alternative arrangements. _____

Ms. Polk megan.peters@cdsbeo.on.ca

Mr. Imeson peter.imeson@cdsbeo.on.ca

(613) 283-6101