



Atlanta Academy Athletic Form

Who: 5th , 6th , 7th , 8th Grade

Boys: Soccer

Girls: Volleyball

Fee: \$75 Make check payable to: Atlanta Academy

Child's Name _____

Grade _____

Sport _____

Please indicate with your signature below that your son/daughter has your permission to participate in the above named sport and is in the proper physical condition to participate in a healthy, safe manner.

Parent's Signature _____

***Practice and game schedule will be posted online. All practices begin **Thursday, August 18th at 3:00 – 4:00PM**