

RILEY COMMUNITY CONSOLIDATED SCHOOL DISTRICT #18

Marengo, IL 60152

Memo To: 6th/7th/8th Grade Boys' & Girls' Soccer Athletes

Memo From: Mrs. Lagerstrom/Coach Mrs. Mortimer/Athletic Director

Subject: Permission Slip for the 2016 Riley School Coed Soccer Team

The 2016 Riley School Soccer Program will begin practice on Monday, August 22. Practice will be from 3:00 to 4:30pm. All students are welcome to participate as long as athletic requirements are met. There will be no tryouts or cuts from the team. The Riley School participation requirements are:

1. Have current physical on file in the office.
2. No failing classes (U's) and/or having 3 D's at one time.
3. Pay the \$100.00 activity fee.
4. Athletic Handbook

Parents are reminded to bring their own chairs and/or seating as bleachers and etc...are very limited at all schools.

2016 Riley School Coed Soccer Schedule

All Games are Coed 6-7-8

Wednesday, Sept. 7	RILEY at Marengo M.S.	6-7-8	4:15 PM	Conf. #1
Thursday, Sept. 8	Prairie Grove at RILEY	6-7-8	4:15 PM	Cont. #2
Monday, Sept. 12	Harvard at RILEY	6-7-8	4:15 PM	Conf. #3
Tuesday, Sept. 13	RILEY at North Boone	6-7-8	4:15 PM	Cont. #4
Thursday, Sept. 15	Fox River Grove at RILEY	6-7-8	4:15 PM	Conf. #5
Monday, Sept. 19	North Boone at RILEY	6-7-8	4:15 PM	Conf. #6
Tuesday, Sept. 20	West. Christian at RILEY	6-7-8	4:15 PM	Conf. #7
Tuesday, Sept. 27	Marengo M.S. at RILEY	6-7-8	4:15 PM	Conf. #8
Wednesday, Sept. 28	RILEY at Prairie Grove	6-7-8	4:15 PM	Conf. #9
Thursday, Sept. 29	RILEY at Fox River Grove	6-7-8	4:15 PM	Conf. #10
Monday, Oct. 3	RILEY at Harvard	6-7-8	4:15 PM	Conf. #11
Tuesday, Oct. 4	RILEY at West. Christian	6-7-8	4:15 PM	Conf. #12

Wednesday, Oct. 12 Soccer Consolation Tournament (Bottom 3 Teams) at Harvard TBA

Wednesday & Thursday, Oct. 12 & 13 MNC Soccer Tournament at Indian Oaks Park TBA

_____ has my permission to participate in the 2016 Riley Soccer Program.

Parents Signature _____ Home Phone _____

Cell Phone _____ E-mail Address _____

Emergency Contact _____ Relationship _____

Home Phone E.C. _____ Cell Phone E.C. _____

Please list any health concerns _____