

# Henley Middle School

## Parent Verification Form

Student: \_\_\_\_\_ Date: \_\_\_\_\_

Sport:  Volleyball  Basketball  Track

I/We would like more information on rules and policies provided to me/us:  Yes

***\*By signing this document, I/We verify I/We have watched the KCSD Athletic Program Policies and Procedures slide show presentation and understand we can request additional information from the school Athletic Director and/or Coach.***

Name: \_\_\_\_\_ Name: \_\_\_\_\_  
(Print) (Print)

Name: \_\_\_\_\_ Name: \_\_\_\_\_  
(Signature) (Signature)

Date: \_\_\_\_\_