



CBS Physical Education
Off-Campus Athletics

Please read the attached information regarding criteria and procedures for learners' Off-Campus PE Log.

LEARNER NAME: _____ GRADE: _____

Grading Period: School Year: 2020/2021 First Semester Second Semester

LEARNER RESPONSIBILITY

I understand it is my responsibility as an Off-Campus Athlete to complete the activity as outlined for five hours a week. I understand that I must submit the signed off campus time sheet logs during the last week of each semester. I UNDERSTAND THAT I WILL LOSE ALL HOURS EARNED AND RECEIVE A FAIL/UNSATISFACTORY IF I LEAVE THE PROGRAM FOR ANY REASON WITHOUT IMMEDIATELY NOTIFYING CALVARY BAPTIST ADMINISTRATION.

Date

Signature of Learner

PARENT'S AWARENESS

I acknowledge that CBS does not investigate the site of the activities of any program to assess potential for injury. I accept full responsibility for any injury, which might occur in this PE activity. I am aware that, if my son/daughter fails to meet the attendance requirements set by CBS, the standards set by the facilitator, and/or the 5 hours per week, he/she will not meet the semester requirement for PE nor receive credit.

Date

Signature of Parent/ Guardian