

George Washington High School
Athletic Department
10175 Bustleton Ave.
Philadelphia, Pa 19116

Ken Geiser
Athletic Director

Telephone (215) 464-8484
Fax (215)-464-8484

August 16, 2010

Dear Parent/Guardian

I, (parent/guardian's name) _____ grant permission for
(athlete's name) _____ from (name of home school)
_____ to participate in the GWHS athletic program. (See schedule
attached)

The buses will be departing from Washington HS rear parking lot, 10175 Bustleton Ave. at (see
schedule attached) and return immediately after the contest. It is the student athletes responsibility to make
arrangements to get from his/her home school to George Washington High School.

Please make arrangements for your child to be picked up at that time.

Please be aware that you must meet PIAA academic eligibility standards as well as the academic
standards of your home school. The Principal or Athletic Director at your home school will always have the
final determination of your ability to continue on the athletic team here at George Washington.

Athletic Director (of Home School)signature: _____

Parent/Guardian signature: _____

Parent/Guardian Emergency contact number: 1: _____
2: _____

Parent's Permission to perform in case of emergency medical treatment
Yes/No Signature _____

If you have any questions, please contact me at 215-464-8484 or e mail at kgeiser@philasd.org

Yours truly,

Ken Geiser
Athletic Director