

**PSIA Registration Form-Strickland School**  
<http://www.psiaacademics.org/>

|  |                     |   |   |
|--|---------------------|---|---|
| <b>PARTICIPANT'S NAME:</b><br>_____  |                     | <b>GENDER:</b><br>_____   | <b>CELL:</b><br>_____   |
| <b>AGE:</b> _____  | <b>GRADE:</b> _____ | <b>Birthdate:</b><br>_____  | <b>SHIRT SIZE:</b><br>_____   |
| <b>CHECK all the academic categories your child would like to compete in. Make sure to read the PSIA Info Letter for Strickland participants.</b>  |                     |   |   |
| <b>Subjective</b>  |                     | <b>Objective</b>  | <b>Speech</b>   |
| <input type="checkbox"/> Creative Writing 1-2<br><input type="checkbox"/> Ready Writing 3-8<br><input type="checkbox"/> On-Site Drawing 6-8  |                     | <input type="checkbox"/> Mathematics 2/3-8<br><input type="checkbox"/> Music Memory 3-8<br><input type="checkbox"/> Number Sense 4-5<br><input type="checkbox"/> Spelling 2-8 | <input type="checkbox"/> Poetry/Prose Interpretation 3-8<br><input type="checkbox"/> Storytelling 1-3 |
| <b>Does your child have apre-existing or current health condition or injury the PSIA volunteers and Strickland staff need to be aware of? If yes, describe.</b><br>_____<br>_____  |                     |   |   |
| <b>Parent info for the parent designated as the primary contact and volunteer.</b>   |                     |   |   |
| <b>PRINT NAME OF PARENT/GUARDIAN:</b><br>_____   |                     | <b>RELATIONSHIP:</b><br>_____   | <b>CELL:</b><br>_____   |
| <b>EMAIL:</b> _____  |                     | <b>OTHER CONTACT # (WORK/HOME):</b><br>_____  |   |
| <b>VOLUNTEER PARTICIPATION AGREEMENT-PSIA parents must support their child by:</b><br><input checked="" type="checkbox"/> Attending the district tournament (See info letter) and participate in any required volunteer work including grading, monitoring, record keeping, etc.<br><input checked="" type="checkbox"/> Providing child with rides to practices and tournaments.<br><input checked="" type="checkbox"/> Providing child with drinks/snacks for activities.<br><input checked="" type="checkbox"/> Assistingchild in studying and preparing for tournaments using PSIA materials.<br><input checked="" type="checkbox"/> Coaching a group of Strickland students during practice sessions, preparing materials OR grading. I can (check one): |                     |   |   |
| <input type="checkbox"/> Coaching Wednesdays   |                     | <input type="checkbox"/> Preparing Materials  | <input type="checkbox"/> Grading  |
| <b>Time/Days available to help</b> _____<br><b>Please list any academic categories you feel you may be best at assisting or additional info.</b> _____<br>_____  |                     |   |   |
| <b>PRINT NAME OF SECOND PARENT/CONTACT:</b><br>_____   |                     | <b>RELATIONSHIP:</b><br>_____   | <b>CELL:</b><br>_____   |
| <b>EMAIL:</b> _____  |                     | <b>OTHER CONTACT # (WORK/HOME):</b><br>_____  |   |

*(continued on back)*

**PAYMENT**

I am submitting the non-refundable participation fee of \$100 made payable to Strickland School) with this form to the PSIA Campus coordinator. This fee covers the PSIA District entry fee and team coaching materials. This fee does not include the PSIA State entry fee or personal materials. Date \_\_\_\_\_ CK# \_\_\_\_\_ Amount \_\_\_\_\_

**TRANSPORTATION**

I hereby give my consent for my child to be transported and supervised by STRICKLAND EXTRACURRICULAR volunteers (initial all that apply):

|                             |                             |                           |                             |
|-----------------------------|-----------------------------|---------------------------|-----------------------------|
| _____ for emergency<br>care | _____ for any<br>activities | _____ to and from<br>home | _____ to and from<br>school |
|-----------------------------|-----------------------------|---------------------------|-----------------------------|

**PARENT/GUARDIAN SIGNATURE:**

\_\_\_\_\_

**DATE:** \_\_\_\_\_