

# Rockets for the Community

**Event Information:**

**Date:** March 8th 2014

**Time:** 8-12 PM. Registration will begin at 7:30 AM.

**Location:** Moon Valley High School  
3625 West Cactus Road  
Phoenix, AZ 85029

**Purpose:** Sports and Club Clinics

**Cost:** FREE!

Special Instructions: Bring permission slip day of event. Wear comfortable clothing and closed toed shoes.

*Save this part of the form for future reference.*

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*Sign this part of the form and bring it with you on the day of the event. .*

\_\_\_\_\_ has permission to attend the clinic event at Moon Valley High School on Saturday, March 8<sup>th</sup>, 2014 from 8am-12pm.

I give my permission for \_\_\_\_\_ to receive emergency medical treatment. In an emergency, please contact:

**Parent Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Parent/Guardian Signature:**

\_\_\_\_\_

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