



Physical Education Opt Out Program

If your student is enrolled in any team sport or physical activity that fulfills the minimum state requirement for physical education (100 minutes per week) they will be able to go to a study hall room to work on homework, study for upcoming tests etc. instead of going to P.E. Parents will sign a document to advise the lead teacher that their student plans on opting out of P.E. Parents must also have a form signed by their student athlete's coach verifying that the student is signed up for a particular sport and when practice/ games will be. The coach will have to sign again verifying that the student athlete did in fact attend practices and games, and the student will receive full credit towards their P.E. grade for that time period. Any times the student is not currently engaged in a sport they will rejoin the regular P.E. classes.

It is our prayer that by offering this we will allow those students who are engaged in after school "sports" the opportunity to get any homework done before mid week and/or weekend practices/games.

Remember, your activity must: - Be a structured athletic program, or a competitive team sport. Here are a few examples: Activities that ARE accepted for P.E Waiver - a league soccer team, a professional dance company, a martial arts class. Activities NOT accepted for PE Waiver - a dance group you started with friends, a professional trainer, working out in your neighborhood gym, playing a game of basketball at a park afterschool with friends.



PATH CHRISTIAN Academy

"Put on the full armor of God, so that...you may be able to stand your ground..." Ephesians 6:10-18

OFF-CAMPUS HEALTH FITNESS/PE WAIVER APPLICATION – STUDENT FORM

The Student Form of the Off-Campus Health Fitness/PE Waiver Application must be completed, signed and returned one week prior to the date a student will be opting out of P.E. before approval will be considered. The signed Coach Form must also be turned into the student's lead teacher one week prior to the date a student will be opting out of P.E. to complete the approval process.

STUDENT NAME _____

GRADE _____ LEAD TEACHER _____

PARENT/GUARDIAN NAME _____

PARENT'S EMAIL ADDRESS _____

ACTIVITY/SPORT _____

VENDOR/ FACILITY NAME/LEAGUE _____

_____ is applying for admission into the PE Waiver Program for (mark all that apply): _____ Quarter 1 _____ Quarter 2 _____ Quarter 3 _____ Quarter 4

THIS STUDENT FORM MUST BE TURNED IN ONE WEEK PRIOR TO THE DATE A STUDENT WILL BE OPTING OUT OF P.E.

I hereby release PATH Christian Academy, its employees, agents, and the Board of Trustees from all claims of liability in any way attributable to this program, including all travel to, from, and during the program. I also understand that all liability in case of accident or hospitalization is the responsibility of the parent. PCA is not responsible for accident or hospitalization insurance.

Student's Signature _____ Date _____

Parent's Signature _____ Date _____

PE Teacher's Signature Lead Teacher Signature (if not PE Teacher)

__Approved __Denied Date _____ __Approved __Denied Date _____



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OFF-CAMPUS HEALTH FITNESS/PE WAIVER APPLICATION – COACH FORM

Student Name: _____ Grade _____

ACTIVITY/SPORT _____

PRACTICE SCHEDULE _____

Total number of hours per week (Mon – Fri ONLY): _____

Brief description of activity that student is involved in:

NAME OF FACILITY/COACH _____ TELEPHONE # _____

COACH'S EMAIL _____

The above schedule must be completed, signed/dated by the coach before the application will be processed. The student or coach should notify the student's lead teacher ASAP if a change occurs in the student's practice schedule or facility.

This application is invalid without the coach's signature and date. (Must meet deadline date)

THIS COACH FORM MUST BE TURNED IN ONE WEEK PRIOR TO THE DATE A STUDENT WILL BE OPTING OUT OF P.E.

COACH'S SIGNATURE _____ DATE _____

I, _____, verify that the above student did attend and participated in the above sports program.

NOTES _____

COACH'S SIGNATURE _____ DATE _____