

Tigers Athletic News



Tigers Soccer Scoreboard

Transfig. 8th

Transfig. 6th

VOLUNTEERS

Through out the year there are needs for volunteers. In past years the people that have volunteered have been a great help. By doing so it reduces the costs in the Athletic program, plus it bring families together creating a stronger community. Any games in the gym are examples of events where we can use people on the scoreboard. And during tournaments we host and playoff games that are here we not only use people on the scoreboard but also at the gate. In addition, the Booster Club will look to sell concessions whenever they can. Stay alert and enter SUG (Sign Up Genius) to select your choices. Thanks.

TIGERS SOCCER NEWS

8th & 7th Grade

The first practice is scheduled for Tues. 09/04 right after school lets out. We will have a combined 8th and 7th grade team this fall. And unless we can pick up a few more players in those two grades we will be asking any 6th graders that want to play to join them on game day. The second practice is scheduled for Thur. right after school lets out. Both practices will end at 5pm. On Thur. jerseys will be handed out. The season schedule will be available the night of 09/04. Most likely the first game will be Sat. the 8th of August.

6th/5th & 4th Grade

The second team will be made up of 6th graders as well as 5th and 4th graders. I am still looking for a couple of parents to assume the position of coach/ assistant coach for this team. The practice schedule will be the same as the older students, for now. The first game for this team most likely be on Sat. 09/08 just as the older students.

The coaches meeting is at Transfiguration at 6:30pm on Tues. 09/04. The schedule should be available that night. It will important to stay in touch with the families, students and coaches—a three way communication process.

Tigers Soccer Upcoming Games

9/08 Transf. 8th

9/08 Transf. 6th

9/

Tigers Athletic News



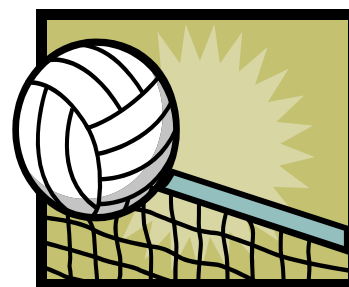
TIGERS VOLLEYBALL NEWS

This fall we will have an 8th and 7th grade combined team. Volleyball is another sport where we can field a team that is co-ed. This team will be coached by Mrs. Feaman and assisted by Mr. Buffalo.

We will have enough players for a 7th grade team. as well. This team will be coached by Mrs. Brennan.

We will have a third team this fall made up of 6th & 5th graders. This team will be coached by Mrs. Lunde.

All the teams are thinking about some practices soon. The coaches meeting will be on 09/12 at 6pm at St. Agnes. After that meeting the schedules will be issued.



Tigers Volleyball Scoreboard

09/

09/

09/28 &29

VB tournament

Tigers Volleyball Upcoming Matches

09/17

09/17

09/19

Athletic Director

A new school year starts next week and with it the fall sports. Welcome back to all the families from last year as well as the new families to our school. Watch for volunteering opportunities. Be aware that coaches, assistant coaches and volunteers need to be current with the VIRTUS training.

I have attached the sports registration form that shows the teams we will be looking to field in the fall season. Notice that it is two pages. If we don't get enough student athletes to sign up with the team of their choice there is the possibility of combining grade levels or joining with another nearby school which also might be short of fielding a full team. The CAA will put together the schedule for each of our teams. Once that is released then the information can be shared with the coaches, players and families.

Any student athlete that wants to play on more than one team in the same season can explore that option, just be aware of the chance of more time conflicts. I have also attached the Fall Registration form that can be used now. Forms can be mailed to me at the school or dropped off beginning 08/22/16. Notice that the form has been modified at the request of the School's insurance company.

In a few months there will be an announcement about winter sports registration.

Any questions can be directed to me. GO TIGERS!!!!!!



Transfiguration Catholic School

6135 15th Street North • Oakdale MN 55128 • 651-501-2220

SPORTS REGISTRATION-Fall 2018-19

PARENTAL/GUARDIAN CONSENT FORM AND LIABILITY WAIVER

Participant's name: _____

Birthdate: _____ Sex: _____

Parent/Guardian's name: _____

Home address: _____

Home phone: _____ Business phone: _____

I, _____ grant permission for
my child, _____, to participate in this school activity.

As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above named minor ("participant"). I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend Transfiguration Catholic School, its officers, directors and agents, and the Archdiocese of Saint Paul & Minneapolis, coaches, chaperones, or representatives associated with the event, arising from or in connection with my child attending the event or in connection with any illness or injury or cost of medical treatment in connection therewith, and I agree to compensate Transfiguration Catholic School, the parish, its officers, directors and agents, and the Archdiocese of Saint Paul & Minneapolis, coaches, chaperones, or representatives associated with the activity for reasonable attorney's fees and expenses arising in connection therewith.

Signature: _____ Date: _____

MEDICAL MATTERS: I hereby warrant that to the best of my knowledge, my child is in good health, and I assume all responsibility for the health of my child. (*Of the following statements pertaining to medical matters, sign only those that are applicable.*)

Emergency Medical Treatment: In the event of an emergency, I hereby give permission to transport my child to a hospital for emergency medical or surgical treatment. I wish to be advised prior to any further treatment by the hospital or doctor. In the event of an emergency, if you are unable to reach me at the above numbers, contact:

Name & relationship: _____ Phone: _____

Family doctor: _____ Phone _____

Family Health Plan Carrier: _____ Policy# _____

Emergency Contact #1 Name _____ Phone _____

Emergency Contact #2 Name _____ Phone _____

Emergency Contact #3 Name _____ Phone _____

Signature: _____ Date: _____

Other Medical Treatment: In the event it comes to the attention of Transfiguration Catholic School, its officers, directors and agents, and the Archdiocese of Saint Paul & Minneapolis, coaches, chaperons, or representatives associated with the activity that my child becomes ill with symptoms such as headache, vomiting, sore throat, fever, diarrhea, I want to be called.

Signature: _____ Date: _____

Medications: My child is taking medication at present. My child will bring all such medications necessary, and such medications will be well-labeled. Names of medications and concise directions for seeing that the child takes such medications, including dosage and frequency of dosage, are as follows:

Signature: _____ Date: _____

No medication of any type, whether prescription or non-prescription, may be administered to my child unless the situation is life-threatening and emergency treatment is required.

Signature: _____ Date: _____

I hereby grant permission for **non-prescription medication** (such as non-aspirin products, i.e. acetaminophen or ibuprofen, throat lozenges, cough syrup) to be given to my child, if deemed appropriate.

Signature: _____ Date: _____

Specific Medical Information: The school will take reasonable care to see that the following information will be held in confidence.

Allergic reactions (medications, foods, plants, insects, etc.): _____

Immunizations: Date of last tetanus/diphtheria immunization: _____

Does child have a medically prescribed diet? _____

Any physical limitations? _____

Has child recently been exposed to contagious disease or conditions, such as mumps, measles, chickenpox, etc.?

If so, date and disease or condition: _____

You should be aware of these special medical conditions of my child: _____

_____ I am interested in information about a coaching position with the Athletic Director

Please sign up for one activity per permission slip.

Completed forms are to be submitted to the Athletic Director.

Payment for all Transfiguration activities may be made by cash or check (made payable to Transfiguration Catholic School).

Athletes are not eligible to play until the permission slip is completed and the athletic fee is paid.

Teams may be co-ed and/or multiple grade levels to field a full team.

Fall Sports
Boys Soccer (5 th -8 th) -- \$65
Girls Soccer (5 th -8 th) -- \$65
Girls Volleyball (5 th -8 th) -- \$65

** In order to keep athletics fees low and provide sufficient equipment for our teams, families will be required to volunteer 4 hours a season or give \$30 to Transfiguration Athletics to hire someone to work tournaments and games and/or fundraising events. These hours can count towards your school volunteer hours as well as athletics.*