  Unified Sports Program ~ SNIS 4th Grade

We are pleased to announce that Sarah Noble Intermediate School is participating in the **Elementary Unified Sports program** with the support of theConnecticut Association of Schools (CAS) and the PTO**!**!

Unified Sports seeks to join students with and without disabilities to participate in a variety of athletic events.  It was inspired by a simple principle: training together and playing together is a quick path to friendship and understanding.

We have received a grant from CAS and the New Milford PTO that will allow us to expand our program to include **4th grade students**.  We are excited to continue this program here at Sarah Noble Intermediate School and want your child to be part of it!

The Unified Sports program will meet on **Monday and Wednesday mornings** from **March 27th to April 26th.**  The program will conclude with a celebratory event April 29, 2017.  The program will be from 7:50 a.m.- 8:30 a.m. and will be run by here at SNIS by our P.E. teacher, Mrs. Daniella Brooks.  Parents must provide transportation.

Participants of our Elementary Unified Sports program will engage in non-competitive athletic activities designed to develop skills in a variety of sports such as soccer, volleyball, basketball, baseball and track events.  The main focus is FUN and FRIENDSHIP!

If you are interested in having your child participate in this exciting program, please fill out the form below and return it to your child’s homeroom teacher.  A lottery, if needed, will be held to choose the appropriate number of participants.  We will confirm your child’s participation via letter.

Feel free to contact us with any questions!

Daniella Brooks and Debbie Clark

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**Unified Sports Program at SNIS - 4th grade - Yes, I am interested!  **

Student’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teacher’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please return to homeroom teacher by March 10th**