

## Science Olympiad Parent/Guardian Letter

Dear Parents and Guardians,

We are so excited your child has chosen Science Olympiad as one of his/her co-curricular experiences at Mount Horeb Middle School. This club will provide an opportunity to explore their love of science while building on teamwork skills. A contract has been provided to your child in order to ensure a safe, productive, successful, and enjoyable middle school co-curricular. Please review the attached contract with your child.

We will meet on **Mondays from 3:30 - 4:45 p.m.** on days in which the students are in school for the entire day. We will send emails at least every two weeks to provide more detailed information

Our team will be participating in several tournaments this year. Please put these dates on your calendar for now. We will contact you before the tournaments with more detailed information. For now, you can visit https://www.wisconsinso.org/ regionalinvitational-tournaments/ for some general information.

**Regional Competition**: Saturday, Jan. 27 at UW-Milwaukee. We will leave before 6 a.m. and return around 7 p.m. All students who meet the practice requirements will be able to participate.



My child does not have a conflict with this date.

**State Competition**: Saturday, Apr. 7 at UW-Milwaukee. We will leave before 6 a.m. and return around 7 p.m. Attendance will be determined following the Regional Competition.



My child does not have a conflict with this date.

**Parent Volunteers:** We are looking for parent volunteers to help us out in a variety of ways, including:



Coaching/mentoring for specific events (rules and coaching tips will be provided)



Assisting with concessions at a high school sporting event (dates TBD)



Chaperoning at the regional and/or state competitions (monitoring of the homeroom and walking students to/from events in different buildings on campus)

(please turn)

If you are willing to help us out, please check the boxes that apply above, and print your name and an e-mail address so we can contact you when we get closer to the events.

Student Name	Parent/Guardian name(s):	
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Email: \_\_\_\_\_\_ Phone: \_\_\_\_\_\_

If you have additional questions, please feel free to contact us or write them on this page. Thank you for allowing your child to participate in Science Olympiad!

Sincerely,	Mrs. Jennifer Stoddard	Ms. Gwyn Padden-Lechten
	Head Science Olympiad Coach (608) 437-3273	Assistant Science Olympiad Coach

stoddardjennifer@mhasd.k12.wi.us padden-lechtengwyn@mhasd.k12.wi.us



\*\*PURPOSE\*\* Congratulations on choosing Science Olympiad as one of your co-curricular experiences! This club will provide an opportunity to explore your love of science while building on your teamwork skills. A contract has been developed in order to ensure a safe, productive, successful, and enjoyable experience.

I will be honest, truthful, and conduct myself in a manner to reflect credit upon my school and community at all times. I must also have the willingness to *cooperatively work* with my group to benefit the team as a whole. When I am working individually, I will <u>produce</u> <u>notes</u> containing all important information regarding my non-building events. I understand that I may or may not compete in this event, but my *focus and learning will contribute to the success of the team.* Only 15 students will be on the competing team, who will be chosen based on effective participation, teamwork, effort, leadership, and scores on practice tests.

I also understand I am to choose one or two non-building events and no more than one building event on which to concentrate my learning and work. I will contribute to planning for the building event and ask my parent(s)/guardian(s) to help with sections that require the use of power and/or building tools. Although I may get adult help in using the equipment, the ideas will be my own. I also understand that our Science Olympiad budget is limited, so *I will do my part to gather and/or provide materials from my home or donations from the community* as needed.

My attendance at Science Olympiad meetings is extremely important to the team's success. I understand that if I have **more than two UNEXCUSED absences**, my parents will be contacted and I will no longer be part of the team. If I must be absent for another co-curricular, appointment, or other excused reasons, I promise to contact the coach prior to the **meeting.** I understand that my **parents are also expected to send my coaches an email** to verify the absence. If I am absent, I will continue to put time into my events.

Lastly, I understand that we need parent/guardians to chaperone our "field trips" to the regional and state competitions. I will ask my parent(s)/guardian(s) if they are willing to join us and provide them with the necessary information and forms required from volunteers.

I understand if I do not abide by any portion of this contract, I will no longer be able to participate.

Student Signature

Student Name (print please)

Date