

Clark Parents,

September 27, 2023

This letter is attached to the UIL information sheet of the events offered for the 2023-2024 school year. If you would like your child to try out for any of these events, please complete the bottom portion and return it to your child's homeroom teacher by **Monday, October 2nd**. Children can only be on ONE team. Tryouts/Selection will be TUESDAY, Oct 10 from 3:45-4:45, with practice starting the week following Fall Break on the designated day. **Please note that not all students who try out will be selected for a team.**

The following events will be offered this year:

2nd Grade: Spelling, Storytelling, Creative Writing

3rd Grade: Spelling, Storytelling, Ready Writing

4th Grade: Art Memory, Music Memory, Oral Reading, Ready Writing, Spelling, Number Sense

5th Grade: Art Memory, Music Memory, Oral Reading, Ready Writing, Spelling, Number Sense, Maps/Graphs/Charts, Dictionary Skills, Listening Skills

If you would like your child to try-out for any of the UIL events listed above, please return the BOTTOM portion of this letter. Rank the ones that interest your child in the order of their preference. Number 1 is their first choice, 2 second, etc.

Thank you,
Kayla McKinney
Clark Elementary UIL Coordinator

Cut here and return by Monday, October 2nd. Be sure to rank your child's preference for the events in which they wish to participate. Number 1 is their top choice, 2 their second choice, etc. If chosen, it will only be for ONE event

YES, my child _____ may try out for the following UIL events.

2nd Grade: ___ Spelling, ___ Storytelling, ___ Creative Writing

3rd Grade: ___ Spelling, ___ Storytelling ___ Ready Writing

4th Grade: ___ Art Memory, ___ Music Memory, ___ Oral Reading, ___ Ready Writing, ___ Spelling,
___ Number Sense

5th Grade: ___ Art Memory, ___ Music Memory, ___ Oral Reading, ___ Ready Writing, ___ Spelling,
___ Number Sense, ___ Maps/Graphs/Charts, ___ Dictionary Skills, ___ Listening Skills

I agree to let my child participate in academic UIL. I understand that transportation is my responsibility. My child and I both understand that attendance at practice is mandatory to staying on the team, except in the case of illness or a family emergency.

Parent Signature _____ Date _____

Student Signature _____ Teacher _____