

Cartersville High School
Summer Session HEALTH & Personal Fitness Registration 2025

Cost: \$61.00 (\$60 plus \$1 service fee)

How to Register

1. Submit this form to the CHS Counseling Department by doing one of the following:
 - a. Have your student turn it in when counselors are at CMS March 6-7.
 - b. Submit the form via email to Mrs. Sloan, Registrar msloan@cartersvilleschools.org.
2. After you submit your form, you will receive an invoice in MySchoolBucks for \$61.00. Your spot will be reserved when your invoice is paid and form is received.
3. If you are unable to pay using MySchoolBucks, please contact Mrs. Sloan at 770-387-5561 for information on how to pay with cash. We are not accepting checks this year. Space is limited.

Date Application Received _____

Student Name _____ Grade (2025-2026) _____

Student Phone # _____ Parent Phone # _____

Student Email (required to register) _____

Parent Name: _____

Parent E-mail: _____

Session Selection: Please choose which week you would like to participate in the courses below. NOTE: The Alcohol, Drug Awareness Program (ADAP) portion needed for students to get his/her driver's license will be held in person on Wednesday, June 4 and Wednesday, June 11. Details about this will come at a later date.

HEALTH COURSE OPTIONS

PE COURSE (STEAM & Embry Riddle students ONLY)

_____ June 2-5, 2025 online

_____ June 2-5, 2025 in-person

OR

_____ June 9-12, 2025 online

By submitting this application, I understand that my child is committed to participating in a half unit of Health during the summer term (June 2-5 or June 9-12). To receive credit, I understand that my child must fully complete the online course within the time frame selected to participate. Failure to do so will result in no credit being placed on my student's permanent transcript. I am also aware that if my child participates, he or she must also be able to document 30 hours of athletic activity in a Cartersville High School sponsored activity prior to the first day of school (see list below). Coaches will take attendance in summer workouts and will submit documentation to the CHS counseling office. Completion of 30 athletic hours as authorized by a certified Cartersville City Schools coach will result in 0.5 credit being awarded for the state course requirement of Personal Fitness on the student's permanent transcript.

School sponsored sports approved for credit are: Basketball, Cheer, Cross Country, Football, Marching Band, Softball, Volleyball and Wrestling.

Credit will be issued for Personal Fitness and Health once both the health class requirements and the Personal Fitness hour requirement have been completed and approved by the CHS Counseling Department.

____ Check here if you would like to be scheduled in weight training after completing summer health and personal fitness.

____ Circle the semester you would like to have weight training in your schedule:

Fall Spring

Elective course(s) you would like to drop in order to take weight training: _____

Parent Signature: _____ Date: _____

Student Signature: _____ Date: _____