

**2010 – 2011 SCHOOL YEAR  
STUDENT ATHLETIC EVENTS, PHYSICAL EDUCATION  
& RECESS PERMISSION SHEET**

Student's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

St. John's Lutheran School asks that this child comply with these agreements:

1. I give permission for my child to participate in any authorized school athletic event, physical education, and recess activities, including those held in the park.
2. My child has my permission to ride to any game or school related activity by bus or car during the present school year with proper seat belts, as required by law.
3. If necessary, immediate first-aid may be given to my child at any school-related activity. In the event that parents cannot be reached, permission is given to transport by emergency vehicle to a hospital for emergency treatment.
4. My child must have a physical examination for the current school year in order to play an organized game in any sport.
5. I am in complete agreement with the above statements, and therefore, authorize the school to proceed as indicated.

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Signature of Parent/Guardian

Date