



SPORTS RELEASE FORM / PERMISSION FORM

I request that:

CHILD'S NAME _____

be permitted to participate in: (circle all that apply)

SOCCER BASKETBALL SOFTBALL TRACK

during the 2020-2021 school year. I will not hold St. John's Lutheran Church and School or its personnel responsible in the event that my child is injured while involved in the activity(ies) indicated above. I realize that I have been encouraged to seek a physician's recommendation for my child to participate in the indicated sport(s).

I also understand that my child is expected to perform up to his or her ability in the classroom and is to participate in all practices and games.

PARENT'S SIGNATURE _____ DATE _____