

Parent Permission Form for Athletic Participation

Dear Parent or Legal Guardian:

Your son/daughter is eligible to participate in a St. John School athletic event requiring transportation to a location away from the school building. This activity will take place under the guidance and supervision of coaches from St. John School. A brief description of the activity follows:

Volleyball, basketball or softball games played at other league schools
Transportation will be by car
Various dates and times

If you would like your child to participate in this event, please complete, sign and return the following statement of consent and release of liability. As parent or legal guardian, you remain fully responsible for any legal responsibility which may result from any personal actions taken by the named student.

(Tear here and return bottom half to St. John School Athletic Association)

I hereby consent to participation by my child, _____,
First Name Last Name
in the event described above. I understand that this event will take place away from the school grounds and that my child will be under the supervision of volunteer school coaches during the stated activities above. I further consent to the conditions stated above on participation in this event, including the method of transportation.

(Print Parent's/Legal Guardian's Name)

(Parent's/Legal Guardian's Signature)

(Date)