

Sports Permission Slip

_____ (Sport) _____ (Year)

If you are interested in playing _____
(sport)
this year, please have this slip filled out and returned
to the Athletic Director by the first day of practice.
_____ is for students in Grades 5
(sport)
through 8. Thank you.

_____ has permission to
(Child's name)
participate in _____ at Trinity
(sport)
Lutheran School for the school year _____.
(school year)

**It is understood that a physical must be completed
before he or she is able to participate.**

_____ (Parent Signature) _____ (Date)

_____ (Telephone Number)