



St. Johns Lutheran School  
245 Line Street South  
P.O. Box 128  
Wykoff, MN 55990

## St. Johns Eagles Cross Country

2023 Permission Slip  
Grades 3-8

Return this form to the office by mail or email by **September 6, 2023** along with the \$45 registration fee.

\_\_\_\_\_ Grade \_\_\_\_\_ has my permission to participate in the St. Johns Cross Country program.

\_\_\_\_\_ I have **NO health concerns** related to my child's participation in the cross country program.

\_\_\_\_\_ **Please note the following health concern(s)** for \_\_\_\_\_ as s/he participates in the cross country program:

\_\_\_\_\_ I understand that the uniform provided by St. Johns must be returned clean and in good condition at the end of the season. If not, I will pay the cost to replace the uniform.

Uniform Size Needed (circle one): YM YL YXL AS AM AL AXL

\_\_\_\_\_ I agree to provide transportation to and from races.

\_\_\_\_\_ I give St. Johns permission to share team photos of my child with local newspapers and the St. Johns website.



Mom's Name & Contact phone #:

\_\_\_\_\_

Mom's Contact email: \_\_\_\_\_

Dad's Name & Contact phone #: \_\_\_\_\_

Dad's Contact email : \_\_\_\_\_

Parent Signature : \_\_\_\_\_ Date: \_\_\_\_\_