



## **REPORT OF INJURY, ILLNESS AND/OR OPERATIONS**

Dear Parents,

It is very important for your child's physical education teacher to be aware of any injury, illness or operation your child has had that may affect his/her performance in class (allergies, a broken arm that did not heal properly, asthma, etc.).

Please complete this form and return it to your child's classroom teacher on or before \_9/\_13\_/2018. We appreciate your cooperation. Month/Day/Year

\_\_\_\_\_My child **does not** have any physical problems or illness that will prevent his/her participation in regular physical education classes.

\_\_\_\_My child **does** have a problem that may hinder his/her participation which is described below.

Type of Injury, Illness or Operation	Date	Prognosis Prognosis	
Special Considerations:			
Student's Name:		Grade:	-
Parent's Signature:			

If at any time your child cannot participate, we must have a written note from you. Once again, thank you for your cooperation.

Mrs. Nancy Appel, Principal

## Mission Statement

We at St. Edward on-the-Lake Catholic School, work together with our families and community to create a Christ-centered environment which promotes Catholic faith formation, academic excellence, and personal development. Our students will have the opportunity to become confident, independent thinkers, and life-long learners who are responsible to God, to themselves, and to society.