**Georgetown Running Club**

**Who**: All Boys & Girls in 3rd, 4th and 5th Grade

**What:** Participate in Georgetown Running Club and 5th Annual 5k (The race will be held on the last session on May 24th **parents are required to attend on race day**)

**When**: After school (3:35-4:30) on Mondays & Wednesday April 8th- May 20th (6 Weeks)

**Cost**: $12:00 (Running shirt, medals and snacks on race day. Please include this with your permission slip.)

**Where:** Georgetown! Practices will take place outdoors unless temperature is below 40 degrees or raining. Appropriate attire is required for safe participation.

**DETAILS**

* Permission slips are due to classroom teacher by Friday, March 15th.
* Students are encouraged to wear running clothes to school. Students can bring a change of clothes appropriate for weather and for exercise as well as gym shoes/running shoes and athletic socks. However, students will be allowed to change into their running clothes after school.
* All participating students **MUST** be able to attend 12 out of 13 practices. If more than one session will have to be missed, please refrain from signing up this year. Thanks!
* Parents/guardians must arrange for prompt pick-up for their participating child at **4:30 pm.**
* No running experience needed! Practices will focus on building self-esteem and healthy habits. Students will learn about stretching and will build running endurance.
* We will have a 5K event at the end of the 5 weeks. A Parent/ Guardian is required to attend and family members are encouraged to run with their child! (More information to come!)

Coaches- Mr. Havinga, Miss Johns, and Ms. Lanning

**Due by Friday, March 15th**

Please **PRINT** information neatly and in ink:

Participating Child’s First & Last Name Home room teacher

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list any relevant medical issues (asthma, etc):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Emergency Contact Information while your child is participation in Running Club:**

Contact Person’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person’s Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I am available to volunteer yes\_\_\_\_ no\_\_\_\_\_

Alternate Contact Person Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to Child:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact’s Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please indicate how your child will get home:

Pick-Up\_\_\_\_\_\_\_ Child will walk home\_\_\_\_\_

Indicate your child’s shirt size:

|  |  |
| --- | --- |
| Youth SizesSmall\_\_\_\_\_\_\_Medium\_\_\_\_\_Large \_\_\_\_\_\_ | Adult SizesSmall \_\_\_\_\_\_Medium\_\_\_\_\_Large\_\_\_\_\_\_\_X-Large \_\_\_\_\_ |

Please sign below signifying you give your child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ permission to participate in the Georgetown Running club on Mondays and Wednesdays after school.

Parent/ Guardian Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOTE: Please remember to enclose your $12.00. Thanks!