

VIRGINIA COMMUNITY SCHOOL DISTRICT #64
PHYSICAL EDUCATION

HEALTH CONCERNS FOR PHYSICAL EDUCATION CLASS

As Physical Educators, we need more information concerning your children. Since our program is fitness oriented, some units will require more running than others. We want to be sure we are aware of all students' health concerns before we do these units. For example, if your son/daughter has exercise-induced asthma, we will work with the student to know their limits. This will reduce any risk during class.

If your child has a physical health concern that we should be aware of, please fill out the following and send in proper documentation from your child's doctor.

Student Name: _____ Grade: _____

Health Concern: _____

ASTHMA:

Does the student need an inhaler or other medication during class: ____Yes ____No

Time of year most dominant: _____Fall _____Winter _____Spring

Thank you for your cooperation. If you would like to discuss your concerns with us, please call the school and set up an appointment.

Physical Education Staff
Sam Nicholas
Diane Razo