



**St. Martin's Lutheran School**  
**253 Liberty St.**  
**Winona, MN 55987**  
**507-452-6928**  
**Fax: 507-452-8992**

Dear Parents/Guardians and Student-Athlete,

July 2023

**Welcome to Soccer season!! Our theme this year is: "Making Disciples for Life".** It is based on Matthew 28:19 which reads: "Go therefore and make disciples of all nations, baptizing them in the name of the Father and of the Son and of the Holy Spirit."

**COACH.** We are still looking for a head and an assistant coach at this time. Please let Mr. Jacobson know if you are interested. We are grateful for our coaches willingness to work with our student athletes to help them to excel to God's Glory!

**NEW UNIFORMS** are provided. Please supply your own shin-guards and soccer shoes. The athlete will need soccer cleats and running shoes. You must wear shin guards during all games and practices. There are some cleats athletes may use during the season. Check with the A.D.!

**PERMISSION/FEE.** The permission slip is attached. Please turn in one permission slip per family. Please include all names of those participating. The fee to participate in soccer is **\$40** per athlete, **\$55** for two siblings, and **\$65** for three. These fees will cover referees, awards, socks, and other expenses for the season. Make checks payable to St. Martin's. If other arrangements need to be made, please talk to the athletic director.

**TRAVEL.** **Parents/Guardians are responsible for travel to and from practice and games.** Families are responsible for picking up the student/athlete at East Lake. Please make arrangements ahead of time with teammates if you need a ride. Please be prompt in picking up your child from practices and games.

**PHYSICALS** are required. Physicals are good for three years from the date received. Please see the school office for a form or on the St/ Martin's website ([www.stmartinswinona.org](http://www.stmartinswinona.org) under the documents tab - athletics).

**WATER** It is important to drink plenty of water. Athletes should bring water to all practices and games.

**PICTURES** will be taken before a future practice. Date and time will be determined once the schedule is finalized. Team and individual pictures will be taken. Order forms will be handed out that week, or can be found in the documents section of Sycamore and on our website ([www.stmartinswinona.org](http://www.stmartinswinona.org) under the documents tab, athletics). The soccer photos will also be taken at this time.

**SCHEDULE** is attached for practices and games for the soccer season. Please keep this sheet and the schedule for your records. The times may be updated. Please be dressed and ready ½ hour before each game. Bring warm clothes to every practice and game. Bug spray is good to have as well.

**SUGGESTIONS**, concerns, idea's, comments, and/or questions are all welcome. Please feel free to call athletics at St. Martin's. We look forward to a fantastic year! Thanks for your prayers in advance!

Training in Christ,  
*Mr. Chris Jacobson*  
**St. Martin's Athletic Director**

**PERMISSION /COMMITMENT SLIP**

In order for your child to be a member of the soccer team and travel with the team, your signature is needed below.

I give my permission for (child’s name)\_\_\_\_\_ to attend the soccer practices and meets on the dates and at the approximate times listed on the attached sheet. I understand that all safety precautions will be taken for the protection of my child. He/she has assured me that his/her conduct will be a credit to him/her and the team. I will not hold the school, coaches, host or drivers liable in case of an accident, during transportation to practice or meets. We will be traveling by walking/jogging, private vehicles, van and/or school bus. Individuals providing private transportation must carry adequate insurance and provide one seat belt for each person. If any changes are made in this schedule, you will be notified at least one day in advance of the coming change. Please return this form and payment. Thanks.

\_\_\_\_\_  
Parent’s/Guardian’s signature

\_\_\_\_\_  
Date

**STUDENT/ATHLETE COMMITMENT AGREEMENT**

I understand that being a student/athlete of St. Martin’s places upon me the following obligations:

1. I will complete all assignments to the best of my ability
2. I will do my very best to succeed according to the ability God had given me.
3. My personal conduct at school, in the community, and during the activity named above will reflect well upon St. Martin’s Lutheran School.
4. I will speak well of the persons in charge of the activity named above, fellow students involved, and the school.
5. I commit myself 100% to the success of the team.

I understand that should I violate any of the above, I may be prohibited from participating.

\_\_\_\_\_  
Student/Athlete Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student/Athlete Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student/Athlete Signature

\_\_\_\_\_  
Date

Please complete & return with payment to the SCHOOL OFFICE by  
**MONDAY 8 - 21 - 2023.**