

St. Bernadette School
Grade 5-through 8
Girls and Boys
Cross Country Fall 2023

We are excited to announce the return of Cross Country to St. Bernadette School this Fall!

Students entering grades 5 through 8 are eligible to run for SBS.

Season Details: The season will run from **mid-September-late October**. The first official practice would begin **September 12th**. The team will practice two times per week on Tuesdays and Thursday from 3:30-4:30pm with meets taking place on Monday or Wednesdays (or best available dates). We will be competing in meets against Catholic and Public schools throughout the Fall. (Meet Schedule TBD). **Please note that team meets will differ in duration from our 1hour practice times so please plan accordingly.**

Our 1.9-mile course located @ **Ellsworth McAfee Park, 363 South Street, Northborough**, will be used for practice and home meets. Parents are responsible for the transportation of their child to and from practice and meets.

Athlete Requirements: For students to be eligible to participate, they **MUST** have an up-to-date physical on file with the school nurse. The physical **MUST** be within the last 13 months from the start of the first team practice before they are allowed to participate.

Please Note: Students **MUST** also complete and return all necessary paperwork as well before the end of school on **September 4th, 2023**.

-Updated Physical form on file and signed off by Nurse's Office.

-[Concussion Form](#) (submitted once a year)

-[Pre-Participation Form](#) (submitted before the start of each season)

All students must complete the [NFHS Concussion Course](#) and submit the above forms before participating in sports at St. Bernadette School.

Parent Volunteers: We are fortunate to have SBS faculty member Margaret Driscoll and her husband Joe Driscoll graciously volunteer their time to coach the team this season. Mrs. Driscoll has coached the team in the past and both she and Joe are avid runners with a wealth of experience. We are very fortunate to have them take the reins this season.

With that said, we are still very much in need of parent volunteers to help assist in practices and meets. For those that perhaps want to be a bit more involved, we are in need of a Team Manager and results tabulator. Any and all parent involvement is encouraged and appreciated!

Volunteers are required to complete a series of steps to assist in any school-related activities. All school volunteer requirements are available on our website's athletic page:

<https://www.stbschool.org/domain/28>

For any parents interested in volunteering this Fall please reach out to "Coach", Mike St.John

mstjohn@stb-school.org

We look forward to a great season!

Regards,

Mike St.John

P.E. PreK 3-8th Grade

Director of Athletics St.

Bernadette School

mstjohn@stb-school.org



St. Bernadette School
266 Main St., Northborough, MA 01532
508-351-9905
www.stb-school.org

St. Bernadette's Catholic School Athletic Permission Slip and Medical Release Form

Student Name: _____

Grade: _____

Home Address: _____

DOB: _____

Email Address of Contact Person:

Parent Name: _____

Home # _____

Work #: _____

Cell # _____

Parent Name: _____

Home # _____

Work #: _____

Cell # _____

In Case of an Emergency Contact (when parents cannot be reached):

Parent Name: _____

Relationship _____

Home# _____ Work # _____

Cell # _____

Does your child require any medications to be with them during practices or events? No / Yes

If yes, please describe:

I as a parent / guardian give my child _____ permission to participate on the St. Bernadette's School Cross Country Team from September 2023 through November 2023. I hereby release and hold harmless St. Bernadette's School and any and all of its employees and volunteers from any liability for any and all harm arising to my child as a result of any sporting event or practice.

Parent Signature

hereby give permission to release to the school's Athletic Director, any medical records, medical forms, and medical release authorizations submitted to St. Bernadette's School Nurse.

Parent Signature

I hereby give my child permission to carpool with the following families:

cell # _____

cell# _____

