チェックおよび

**MARATHON HEALTH CHECK AND PERMISSION SLIP**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| Grade |  | Class |  | Number |  | Student’s Name |

では、ごと、ごとに、みんなでいをり、タイムをいます。のも

ぜひにてください。

At the marathon event, everyone runs a long distance and competes for time by grade and by gender.

Parents are also welcome to come and support us.

、がベストコンディションでできるように、でのをおいします。

We hope for everyone to be at their best for the marathon. Please complete this form about your daily life.

**○・×をつけましょう。**Please respond with **○** or **×.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | 日/Day | 日/Day | 日/Day | 日/Day | 日/Day | 日/Day | 日/Day |
| ゆうべは　よくねましたか。  Did you sleep well?  ですか。  How long do you sleep? |  |  |  |  |  |  |  |
| Hrs  時間 | Hrs  時間 | Hrs  時間 | Hrs  時間 | Hrs  時間 | Hrs  時間 | Hrs  時間 |
| あさごはんを　たべましたか。  Did you eat breakfast? |  |  |  |  |  |  |  |
| かぜを　ひいていますか。  Did you have a cold? |  |  |  |  |  |  |  |
| おなかは　いたいですか。  Did you have a stomachache? |  |  |  |  |  |  |  |
| ねつは　ありますか。  Did you have a fever? | ℃ | ℃ | ℃ | ℃ | ℃ | ℃ | ℃ |
| ほかに　からだに　いじょうは　ありますか。  Did you have any other problems? |  |  |  |  |  |  |  |
| 担任の印  Homeroom Teacher’s Stamp |  |  |  |  |  |  |  |

★ ○ から、にしてください。

This form must be presented to your homeroom teacher everyday from ○.

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Please return the permission slip below on the day of the marathon.

-------------------------------------きりとり　CUT-------------------------------------

**参加届 PERMISSION TO PARTICIPATE IN THE MARATHON**

|  |
| --- |
| (　　　　　　　　) のにします(**Will** participate in today’s marathon.) |
| (　　　　　　　　) のにしません(**Will not** participate in today’s marathon.)  (） Reason: |
| |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  | | Grade |  | Class |  | Number |  | Student’s Name | |  |  |  |  |  |  |  | |  |  |  |  |  |  | Parent/Guardian’s Signature | |