

Patapsco 8th Grade Dance Decoration Committee

After School Permission Slip

Please Return to **Ms. Salsman** by Tuesday May 16, 2017 (or before the first day you plan to stay)
Students will not be able to stay after without this permission slip completed.

Name of Activity: **8th Grade Dance Decoration Committee**

Student's Name: _____

Parent/Guardian Name(s) and Contact Information:

Name: _____

****Phone:** _____

Email: _____

****VERY IMPORTANT:**

Please provide phone numbers that we can use to contact you during program hours from 2:50pm-4:00pm.
Transportation is not provided and students will need to be picked up promptly at 4:00.

Meetings will take place on the following days:

- Tuesday 5/16
- Tuesday 5/23
- Thursday 5/25
- Tuesday 5/30
- Thursday 6/1
- Tuesday 6/6
- Wednesday 6/7
- Thursday 6/8

My signature below indicates that my child has my permission to participate in the program on the dates listed above, and that I will pick up my child/arrange for my child to be picked up at 4:00.

Parent Signature _____ **Date** _____

_____ My child will be picked up by someone other than myself: _____

_____ My child has permission to walk home

WE NEED PARENT VOLUNTEERS!

If you are able to come to help out on ANY of the dates above, please highlight them. Please note that if you highlight, we will not call to confirm. We will just expect you there.

Thanks!

Kalina Salsman (8th Grade Team Leader) and Marisa Berry (8th Grade Committee Chair)