**HAZELWOOD NORTH MIDDLE SCHOOL**

PARENT PERMISSION FORM FOR

AFTER SCHOOL ACTIVITY PARTICIPATION

Dear Parent/Legal Guardian:

Your son/daughter is eligible to participate in a school-sponsored activity which will take place after school. If your student is a bus rider, transportation will be provided at the conclusion of the after school activity. This activity will take place under the supervision of employee(s) of Hazelwood North Middle School.

Activity: **Book Battle Club**

Designated Supervisor: **Mrs. Craig**

Dates of Activity:  **Every Tuesday: Starting Tuesday, September 11, 2018**

If you would like for your child to participate in this event, please complete, sign and return this statement of consent and release of liability. As a parent or legal guardian, you remain legally responsible for action of named student.

I hereby consent to participation by my child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, in the event described above. I understand that my child will be under the supervision of the designated school employee on the above stated dates. In order for my child to participate in this activity I understand that this form needs to be returned to the designated supervisor of this activity.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Print Parent Name)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Parent Signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (In case of Emergency, Parent contact #)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Date)