After School Activity Permission Form
Fall Session
Sept. 14th – Nov. 20th

Student Name: _____ Grade Level:_____

Emergency Contact Information:

Name: _____ Relationship:_____

Phone Number: _____ Alternate Number:_____

Please circle your choices. Space is limited. Sign-up early to reserve your spot!

Lawn Games Club

Grade levels – 5-8
Day - Mondays
Instructor – Mr. Ackerson

Fun With Theater Arts

Grade levels - 3-5
Day - Mondays
Instructor - Mrs. Conway

Popular Dances for the Novice Dancer

Grade levels - 3–6
Day – Wednesdays
Instructor - Mr. Horn

Tabletop Game Club

Grade levels - 6-8
Day –Wednesdays
Instructor - Mr. Kiefer

Outdoor Adventure Club

Grade levels 4- 8
Day – Wednesdays
Instructors - Mr. Hills &
Mrs. Craven

Around the World in 60 Days

Grades Levels – 3-8
Day - Thursdays
Instructor - Ms. Aubrey

Field Hockey Club

Grade levels 6-8
Day - Thursdays
Instructor - Mrs. Zotti

Community Service Partners

Grade levels - 6- 8
Day - Thursdays
Instructors - Mrs. Lindsay &
Mrs. McDonough

Will the student be taking the late bus every time?

- ☐ Yes
- ☐ No
- ☐ Sometimes (Please, send note on the day of the activity indicating how he or she will be getting home on the day of the club or activity.)

Parent/Guardian Signature: _____ Date _____

Parent/Guardian Phone Number: _____