



After-School Reflections Workshop

"Beauty is..."



Permission Slip

My Child, _____, has my permission to stay after school on Wednesday, September 30th to participate in the PTA's Reflection Workshop until 4:00 pm.

Parent/Custodian Signature: _____

Date: _____ Classroom Teacher: _____

Person Picking Up My Child After the Reflections Workshop:

_____ (phone) _____

In case of Emergency, please contact:

_____ (phone) _____

***Please return this completed form to school in an envelope marked, **ACE PTA/REFLECTION CHAIR** by Friday, September 18th.



Thank You,
Megan Phelps
PTA Reflections Chair
mphelps2@windstream.net