

Please sign up for Remind 101: Text @2a9ahe to the number 81010

Permission form for Art Club 5-6

Art Club 5-6 (art club II)* is an after school enrichment program designed to provide students with opportunities to further explore their interests in visual art in a more relaxed, independent environment. Additionally, Art Club 5-6 will offer students opportunities to participate in the creation of visual art displays, sets and decorations for a variety of community and district wide events. Art Club 5-6 is open to all 5th and 6th grade students and will meet on Wednesdays until 3:20 in the art room. **Our first meeting will be held on Wednesday, September 22.** Please be advised that art club may not meet every Wednesday due to principal's meetings, abbreviated days and/or parent/teacher conferences. Meeting dates will be posted with advanced notice on the Art Club section of the Frank Antonides website as well as through Remind 101.

At 3:20, students will exit from the door of the art room. **Parents and guardians are kindly asked ONLY to pick students up from the parking lot near the athletic fields.** Please complete the permission slip below. For the safety of your child, students will not be permitted to participate in Art Club 5-6 without a signed permission slip. To ensure that all participating students are accounted for, students are required to communicate to Mrs. Andreasi either verbally, through parent note, phone call or e-mail if they are unable to attend a club meeting prior to the meeting time. If you have any questions or concerns, please feel free to contact me at candreasi@wlbschools.com or at ext. 1270.

**Club name changed to avoid confusion for new members.*

Warm Regards,
Mrs. Andreasi

Students must hand in the completed permission slip before participating in Art Club 5-6. Please retain the top portion for your own information.

I _____ give my child _____
(please print first and last name) (please print first and last name)

permission to attend Art Club 5-6 on Wednesdays until 3:20 in the art room.

Please select how your child will be getting home.

My child will be:

___ picked up by his/her parent/guardian.

___ walking home.

___ picked up by a friend or other family member (*please provide a name*). _____

Please provide the contact information of an individual who can provide alternate transportation in the event of an emergency.

Name of emergency contact/pick up: _____

Phone Number: _____

Parent/Guardian Signature

Date