

# MS SOCIAL COMMITTEE EVENT

A permission slip **MUST** be filled out for each MS student and turned in to participate.

Please bring this slip to the event to be turned in to the parent volunteers.

Permission slips will be available to sign at event if you forget them!

**YOU WILL NOT BE ABLE TO PARTICIPATE IN THE EVENT WITHOUT A SIGNED PERMISSION SLIP!**

I, \_\_\_\_\_ give permission for my 6<sup>th</sup>, 7<sup>th</sup>, or 8<sup>th</sup> grade  
(Parent/Guardian Name – Please Print)

Flagstaff Student \_\_\_\_\_ to attend and participate in  
(Student Name – Please Print)

The **MS ICE SKATING NIGHT** at the Longmont Ice Pavilion 725 8th Ave, Longmont CO 80501.

## **PARENT-**

By signing below, I understand there is the possibility of injury and do not hold Flagstaff Academy, Flagstaff Academy PTO, participating parents, teachers, or staff responsible for injuries that may occur during the event. My student understands and agrees to follow the instructions given by the parent volunteers and to follow Flagstaff Academy safety guidelines. My student will stay at the event location during the duration of the event and only leave when being picked up. As a parent/guardian, I understand that if my child is removed from the event for any reason, it is my responsibility to promptly pick up my child from the event. My student's behavior is subject to the Flagstaff Academy Code of Conduct and I understand violations of that Code of Conduct may result in disciplinary action as a student of Flagstaff Academy through the school as appropriate.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ or

Other Phone: \_\_\_\_\_ number where you can be reached during the event.

**\*\*If your student will be going home with someone other than the Parent/Guardian please list who they are authorized to leave with\*\*:**

Authorized Adult Name: \_\_\_\_\_

Their Phone Number: \_\_\_\_\_

## **STUDENT-**

I agree to follow the Flagstaff Academy Code of Conduct and the rules set forth by the volunteers at the event and support the school safety/rules policies. I will stay at the event location during the duration of the event and only leave when being picked up.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_