



**ST. GABRIEL AFTER SCHOOL ENRICHMENT (ASE)  
PARENT/GUARDIAN PERMISSION FOR LATE ARRIVAL TO ASE PROGRAM**

My child, \_\_\_\_\_, has permission to arrive late to ASE due to participation in \_\_\_\_\_ (List activity, sport, or club) on the St. Gabriel the Archangel campus.

Date Beginning	Date Ending	(Circle) Days of the Week child will arrive late	Approximate time of arrival of child	Activity Location (EX. Gym, Library, Classroom 100)
		M T W Th F		

Please initial each box after reading:

I understand that St. Gabriel staff is not responsible for transfer of my child from said activity to After School Enrichment.

I understand that my child is not the responsibility of the St. Gabriel Preschool or ASE staff until my child Checks In to the program each day at the approximate time listed above.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date signed