

Crafting Club



Dear PCS families;

We are excited to offer Crafting Club! Students who join the Crafting Club will learn to make a variety of crafts. Students will work on fine motor skills, expand their creativity, and build social skills.

The Crafting Club will be run by Ms. Helt. There will be 6 sessions. Due to the limited materials and space available, the Crafting Club will be limited to 10 students. If more than 10 students are interested, participants will be selected through a random lottery. *ONLY participants who have been chosen from the lottery will be able to participate in The Crafting Club.* If your child's name was drawn from the raffle, you will be notified of their enrollment by April 6th via email. **Only students who have been selected from the raffle will be notified with an email of their selection in The Crafting Club.** ****Please note, if we are able to obtain a parent volunteer, we will be able to invite more students into the club.**

Crafting Club will meet each Thursday after school until 4:30 PM. Parents will be responsible for transportation. All participants must commit to attending all 6 weeks of the session. The club will not run on half days. In the event of an early dismissal due to weather, the club will be canceled for that day and another day will be added in February.

Week 1	April 20th
Week 2	April 27th
Week 3	May 4th
Week 4	May 11th
Week 5	May 18th
Week 6	May 22nd **This is a Monday since Thursday is a half day

Please feel free to contact Ms. Helt (helta@plymouth.k12.ct.us) with any questions. If your child is interested in being a participant, and you are able to commit to the dates and times of the session, complete and return the permission slip to their classroom teacher by Friday, March 31st.

Crafting Club



I give permission for my son/daughter to participate in the six day session of The Crafting Game Club. My child will be in attendance every day of the session and I will provide transportation for my child to be picked up at 4:30.

Student's Name: _____

Grade: _____ **Classroom Teacher:** _____

Parent's Name (Please Print): _____

Parent's Signature: _____

Parent's Phone Number: _____

Parent's Email (please write email address in clear print): _____

Emergency Contact Name: _____

Emergency Contact Phone Number: _____

Please check yes if you are interesting in volunteering:

- Yes, I am interested in volunteering to assist for the 6 days of Crafting Club**

Parent Name: _____

Contact Email: _____