

EMERSON MIDDLE SCHOOL

AFTER SCHOOL PERMISSION SLIP



Student Name: _____

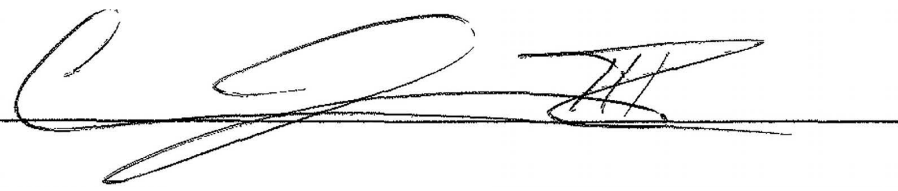
Has my permission to stay after school on Boys Basketball Season
Day of Week/Date

From 3:00 to 5:00 for the following reason:
Time Time

Location: Food's Room / Cafe Supervising Teacher: Booth

If you have any questions or concerns, please contact me at school at 734-744-2665.o

Thank you,

Teacher signature 

Please know that it is the responsibility of the parent/guardian to arrange for transportation. All students must leave the building within 15 minutes of the end of an activity.



Indicate below how your child will return home:o

- Walk or ride bikeo
- Transportation by caro



Parent/Guardian Signature _____ Date _____ o