

EMERSON MIDDLE SCHOOL

AFTER SCHOOL PERMISSION SLIP



Student Name: \_\_\_\_\_

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

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

Location: Foods Room / Cafe / Supervising Teacher: Boeth

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

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:

- Walk or ride bike
- Transportation by car



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