

JOIN GRICE MIDDLE SCHOOL'S ROBOTICS CLUB!!!!

PARENT/GUARDIAN NAME: _____

PARENT/GUARDIAN PHONE #: _____

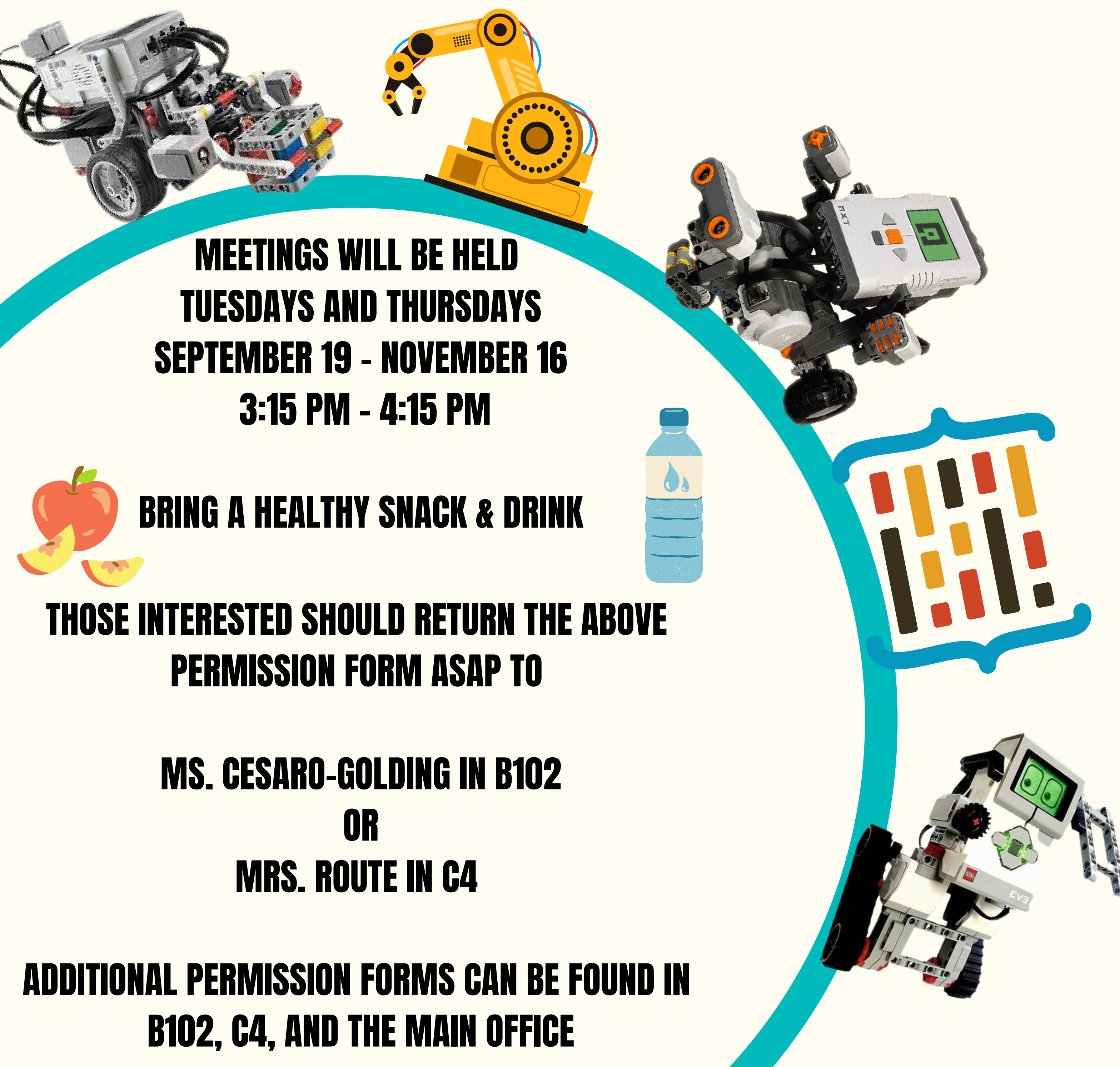
STUDENT'S NAME: _____

STUDENT'S GRADE & HOME BASE CLASSROOM: _____

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

CIRCLE ONE: MY CHILD WILL: BE PICKED UP WALK HOME. OTHER: _____

DETACH ALONG THE DOTTED LINE AND RETURN THE ABOVE PORTION ONLY



**MEETINGS WILL BE HELD
TUESDAYS AND THURSDAYS
SEPTEMBER 19 - NOVEMBER 16
3:15 PM - 4:15 PM**



BRING A HEALTHY SNACK & DRINK



**THOSE INTERESTED SHOULD RETURN THE ABOVE
PERMISSION FORM ASAP TO**

**MS. CESARO-GOLDING IN B102
OR
MRS. ROUTE IN C4**

**ADDITIONAL PERMISSION FORMS CAN BE FOUND IN
B102, C4, AND THE MAIN OFFICE**