

Middle School Before and After School Program Permission Slip

Sponsored by St. Matthew's Lutheran Church (smlc.cc) 425-226-2420

St. Matthew's Lutheran Church offers **free** before and after school program activities for middle school students. These adult-supervised programs are designed to give kids a safe and fun place to hang out before school from 7:45-9:00am on late-start Fridays and after school on Tuesday afternoons from 2:35-4:00pm. Students who ride the bus to McKnight Middle School will have the opportunity to ride an activity bus home at 4:00pm. Other students will need to provide their own transportation to and from St. Matthew's. **Students will need this permission slip to be allowed to participate in the programs.**

I hereby give my consent for _____ to participate in the Middle School Before and After School Programs sponsored by St. Matthew's Lutheran Church. I understand that some activities may take place at either the church or McKnight Middle School. I also understand that my child is responsible for his/her own transportation between buildings. I will not hold St. Matthew's Lutheran Church, McKnight Middle School or any of the volunteers or staff associated with the above listed program responsible for any injuries, damage, or personal loss incurred while participating in the program activities.

_____ (parent/guardian initials) I give my permission to St. Matthew's Lutheran Church to use photographs of my child in its public displays or media releases. I understand that these photographs will not be sold or used for commercial purposes.

The expectations of participants in the after school program: put downs and disrespectful language are not tolerated and no drugs or weapons are allowed on the premises. Students will not be allowed to leave church grounds or school grounds and return to the program for any reason. **All students must show Student ID cards to enter the building.** I have discussed appropriate behavior with my child and I understand that my child must follow all program rules.

Parent/Guardian signature

Date

Student signature

Grade

Address of Parent: _____

E-mail address of parent: _____

Emergency contact #1 (name/phone) _____

Emergency contact #2 (name/phone) _____

Medical concerns _____

_____ My child rides a bus to McKnight and will need activity bus transportation home.