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| **Howard County Public School System** |

**PERMISSION SLIP FOR 8th Period**

**Patuxent Valley Middle School**

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| School’s Name: | Patuxent Valley Middle School | Teacher’s Name(s): **Mrs. Thompson and Mrs. Chelidona** | Time: 2:30 pm to 4:00pm  **Bus transportation is available.** |

Activity Name and Location: Every other Tuesday in the cafeteria

Additional Information:  **Students are encouraged to bring a snack.**

Due Date: **Please return the completed form to Mrs. Thompson or Mrs. Chelidona on or before September 24th**

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| Name of Student: ***(Please Print)*** | Grade: | | DOB: | |
| Name of Parent/Guardian: ***(Please Print)*** |  | | | |
| Parent/Guardian Physical Address: |  | | | |
| Parent/Guardian contact numbers: (home): | (h): | (w): | | (cell): |
| Alternative emergency contact name: |  | Relationship to child: | | |
| Alternate emergency contact phone #’s: | (h): | (w): | | (cell): |

**Medical Emergency**

In case of an emergency, PVMS will call 9-1-1 and your child will be transported to the nearest hospital. Staff at PVMS will notify you of the situation.

**Student Code of Conduct**

All school system policies and school rules are in effect for the duration of the trip. A student may lose the privilege of attending the activity/class if school rules are not followed.

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| |  | | --- | | Tuesday, January 21 | |  | |  | |  | |  | |  | |  |   **Dates of Activity/Class:**   |  | | --- | | Tuesday, October 8 | | Tuesday, October 22 | | Tuesday, November 5 | | Tuesday, November 19 | | Tuesday, December 3 | | Tuesday, December 17 | | Tuesday, January 7 | |
| I am a: \_\_\_\_ walker \_\_\_\_\_\_ car rider \_\_\_\_\_ bus rider  I grant permission for (print student’s name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to attend \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.  I recognize that the Howard County Public School System cannot be held responsible for conditions beyond their control.  Parent’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |