

Permission Form

2018-2019

Student Name: _____ Grade: _____

I _____ give my permission for my student to participate in Perspectives After School (PAS), taking place weekly in the Vinalhaven School Cafeteria. I understand that activities may include short walking trips in the area, or short field trips requiring vehicle transport, as scheduled in the monthly calendar.

My student will attend: Tuesdays, 2:40-4:00 pm _____ Wednesdays, 2:40-4:00 pm _____

Signed: _____

Date: _____

CONTACT INFORMATION:

Name/Relation: _____ Phone: _____

Email: _____

Name/Relation: _____ Phone: _____

Email: _____

SPECIAL INFORMATION: Is there anything we need to know about your child?

Allergies: _____

Other: _____

PHOTO RELEASE:

_____ I allow Perspectives After School to use photographs that include my child in newsletters, pamphlets, social media, and other organization work. Photos will never include your child's name.

_____ I do not allow Perspectives After School to use photographs that include my child in newsletters, pamphlets, social media, and other organization work.

PAYMENT INFORMATION: This year Perspectives will be run in 4-week sessions. The cost is \$20 per session, payable on first day of each session. The cost per week is still \$5, but this gives the school and Perspectives advance notice of attendance numbers – a big help to all! Un-registered drop-ins are welcome at a cost of \$7 per session, payable on the day of attendance. Please make checks payable to *Vinalhaven Land Trust*. Scholarships available – please ask!

FOR MORE INFO: Check our monthly newsletter and calendar for programming details, on Facebook at Perspectives After School, or perspectivesafterschool@gmail.com **THANK YOU!**

