



ST. GABRIEL CHILD CARE

PARENT PERMISSION FOR AFTER SCHOOL ACTIVITIES ON THE PREMISES

Date _____

I request that my child, _____, leave the After School Care (ASC) to participate in the following St. Gabriel School or St. Gabriel Church activity held on the premises of St. Gabriel the Archangel. (This includes the school building, gym, and church, but not Happy Acres.) **My child and I both understand that he/she must check-in at After School Care before attending the activity.**

List activity (one activity per sheet): _____

Days child will leave the ASC: _____
(Any changes must be sent in writing)

Time activity begins: _____

Time activity ends: _____

___ My child is allowed to make the decision not to attend this activity each week.

___ My child must attend this activity each week.

***You must check one of the following:**

___ I request that my child return to the ASC after attending the above listed activity. My child may return unchaperoned and must report to the on-site director upon his/her return to the center.

___ I request that my child return to the ASC after attending the above listed activity. My child must return chaperoned, and it is my responsibility to make the necessary arrangements for his/her return. My child must report to the on-site director upon his/her return to the center.

___ My child will not return to the ASC after attending the above listed activity.

If there are any changes, the ASC staff must be notified immediately.

THIS PERMISSION FORM APPLIES TO THE FOLLOWING ACTIVITIES:

- *Volleyball practices and/or games
- *Basketball practices and/or games
- *Tennis or golf lessons
- *Sport clinics/practices
- *Rosary Club
- *Tutoring
- *Choir practice
- *Scouts
- *Quick Recall
- *Academic Clubs
- *Art Club
- *Church or School Related Activities

I, the undersigned, agree to all of the above and release SGCC employees from any and all liabilities for any injuries, loss, or other claims arising out of or resulting from this activity.

PARENT'S SIGNATURE _____