



## AFTER SCHOOL ACTIVITY PERMISSION SLIP

**TODAY'S DATE:** \_\_\_\_\_

**MY CHILD,** \_\_\_\_\_, **GRADE** \_\_\_\_\_, **ROOM** \_\_\_\_\_  
(CHILD'S FIRST AND LAST NAME)

**WILL BE STAYING AFTER SCHOOL FOR**

\_\_\_\_\_.

**PARENT'S NAME:** \_\_\_\_\_  
(PRINT FIRST AND LAST NAME)

**PARENT'S SIGNATURE:** \_\_\_\_\_



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