



Tuesdays

GRADES 5-8

Beginning October 9, 2018

3:15-4:00 p.m.

Student Council will meet on Tuesdays on the following dates: October 9, November 6, December 4, January 8, February 5, March 5, April 9 and May 7 (as Student Council meets once a month, please make sure you mark your calendars when you meet.)



NAME: _____ GRADE: _____

I give my child, _____, permission to remain after school for Student Council. I agree to pick up my child promptly at the specified time at the front of the building. If someone other than a parent will be picking up my child, I am aware that I must send written consent to school. I understand that all school rules and policies, in addition to those specific to the program, are in effect during after school activities at KCS. In the event of noncompliance, the principal, Mrs. Albert, or the program facilitator, may remove students from the program. As with all extra-curricular activities, students must maintain satisfactory grades, behavior, and attendance in all of their classes to participate in this program.

Parent's Signature: _____

Date: _____

Emergency Contact: _____ Phone #: _____