J. Michael Lunsford Middle School
After School Permission Form

My child ___________________________ Grade ____
(please print clearly)

has my permission to stay before/after school on the following weekdays (circle one):

Monday       Wednesday       Thursday

to participate in the following activity:

________________________________________
(name of activity, you must use a different form for EACH activity)  

My child will be:
___riding the activity bus
___getting picked up on the side of the building at 4:28

Please have your student return this slip to ________________ in room ________.

Parent signature: _______________________
Phone number: ________________________