

After School Club Permission Slip

(Please turn into the front desk)

After -School Club Details:

- Monday - Friday 4:15pm – 5:00pm unless otherwise noted **(Prompt pick – up required)**.
- Clubs will meet once a week unless otherwise specified.
- No clubs on Wednesday (early release at 2:30pm).
- Student must have signed permission slip to attend.
- Please provide student with afternoon snack.
- Please remember clubs will not meet if school is not in session.

After - School Club Goals:

- To advance student achievement by providing extended learning opportunities in a safe, caring and supportive environment.
- To ensure that after-school clubs complement and reinforce academic rigor and DSST: Core Values.
- To provide enrichment programs, or recreational alternatives for students who desire reinforcement, exposure, or non-competitive opportunities to develop intellectual or recreational interests and skills.

I give my permission for my student, _____ (name of student) to participate in the _____ (name of club). I agree to hold harmless the Denver School of Science and Technology, its staff and formal sponsors/chaperones, for any accident, injury or damage that may happen to my student.

I acknowledge that my student's participation in these activities potentially involves risks and obligations that are impossible to predict, but may include the risk of loss or damage to personal property and the risk of sickness, personal injury, or death. I hereby release and forever discharge DSST, its respective officers, directors, employees, agents, successors, and assigns from any and all claims, demands, actions or causes of actions whatsoever, arising out of, or to arise out of, or connected in any way, directly or indirectly with any injury to the undersigned's child(ren) incurred while participating in any school activity, when such activity is under DSST's jurisdiction, sanction or sponsorship.

I understand that DSST does not purchase, or have any medical, dental, or hospitalization insurance to cover injuries to, or loss of life of, pupils or to indemnify parents and guardians for expenses in connection therewith, and that such insurance, if desired, must be purchased by me.

I give consent for DSST authorities to take appropriate action for the safety and welfare of my child while participating in school activities.

This is a school sponsored event so ALL School rules apply, including and especially the School's rules regarding no alcohol, no drugs and no smoking. Use of alcohol, illegal drugs, or tobacco products will result in disciplinary action and may result in the student being sent home immediately at your expense. The highest standards of behavior and cooperation are expected at all times.

Thank you in advance for your help making this a fun, safe after school environment. **A comprehensive list of after school clubs can be found on the main DSST Byers Middle School website, under the after school club.** If you have any questions, please feel free to contact Mr. Greif at cassidy.greif@scienceandtech.org

In consideration of allowing my student to participate in the DSST: Byers Middle After-School Club program, related events, and activities, I the undersigned, acknowledge, and agree that:

1. I have read the information contained within this permission slip. _____ Initial
2. I will contact the club sponsor with specific questions about club dates and logistics. _____ Initial
3. That my student is responsible for attending **interventions over clubs.** _____ Initial
4. I am responsible for knowing my student's schedule, and transportation related to after school clubs.
_____ Initial

Parent/Guardian Name and Signature: _____ **Date:** _____

Student Name: _____

Parent/Guardian Emergency Contact #: _____

Parent/Guardian E-mail _____