SY24-25 After School Club/Activity Permission Form
This form is required for meetings or activities that happen on the Bak MSOA campus.

Parent/Guardian: As part of the permission process, you must fully complete all documents. Additionally, if your child requires the administration of medication and/or medical treatment after school, then certain documents must be received before your child may attend. Please have your child return the completed and signed form to the sponsor (and all other documents). This form, along with any other required information, is required for your child to participate in an after-school club or activity.

Section I - Club/Activity Information

School : Bak Middle School

Club/Activity: Speech and Debate Club

Sponsor: Claire Holmes

Sponsor Contact Info: claire.holmes@palmbeachschools.org

Event/Activity: In-school club meetings as well as out-of-school tournaments.

Date(s): 9/4/24, 9/11/24, 9/18/24, 9/25/24, 10/2/24, 10/9/24, 10/16/24, 10/23/24, 10/30/24, 11/6/24, 10/13/24, 10/20/24, 12/4/24, 12/11/24, 1/8/25, 1/15/25, 1/22/25, 1/29/25, 2/5/25, 2/12/25, 2/19/25, 2/26/24, 3/5/25, 3/12/25, 3/19/25, 4/2/25, 4/9/25, 4/16/25, 4/23/25, 4/30/25, 5/7/25, 5/14/25, 5/21/25

Section II - Student and Parent Information

Student Name _____ **Grade** ____

Parent Contact Information

Parent Name _____

Home Phone _____ **Work Phone** _____

Cell Phone _____ **Email** _____

Additional Emergency Contact

Name _____ **Phone** _____

Section III - Medical Disclosure (*Check the correct box and explain if necessary - including why, what, when & how*)

1. My child needs medication or medical treatment if he/she stays after school. YES ☐ NO ☐ If yes, please explain and immediately contact the sponsor for directions on the mandatory procedures for the administration of medication and/or medical treatment. Procedures must be completed before your child attends.

_____

_____

2. My child has the following health concerns/ailments/allergies: _____

_____

_____

For car riders: If your child is not picked up by the designated time, your child will be sent to Aftercare. A fee of $5.00 will be charged in 15-minute increments. Refer to the Bak SchoolMessenger - *School Info* for information on aftercare (Curtain Calls).

*Failure to adhere to district or school policies, procedures, or rules and/or guidelines will result in dismissal from the event/activity/club.

By signing below, I acknowledge that I have read, understood, and will adhere to all requirements. I understand that failure to complete or meet any of these requirements will result in my child being ineligible to attend the club/activity.

_____ _____ _____
Parent Name (print)   Parent Signature   Date