

George Washington High School
Form B - Parent Permission Form (PPF)
(place on your clubs letterhead)

Sample

Date _____

Dear Parent(s)/ Guardian(s)

Request permission State the activity and Details (Time/ Location, and other pertinent information). Your permission is requested for your son/daughter to participate in the SBA Haunted House - "American Horror Story," which will occur on October 30, 2015 at the GWHS D-Wing courtyard. Setup time will begin at 8:00 a.m. and breakdown will begin at 9:00 p.m. The Haunted House will be open to the public at 6:00 p.m. Your child should be picked up no later than (indicate time).

Purpose The purpose of this activity is to afford individuals an opportunity to showcase their gruesome talents, make-up skills, theatrics, and provide the public with a scary experience along with providing an opportunity to raise funds in order to meet the needs of the club. Events are only successful with the collaboration and commitment of individuals. Members are asked to bring materials that will enhance the efforts to have a successful event. There will be adult supervision throughout the activity.

Standard Statement Should you have any concerns regarding this activity or your child's participation in the activity, you may contact the chairperson or advisor at the information stated below. We thank you for all that you do in order for us to be successful in our eandeavors.

John Cruz, indicate contact number
Chairperson

Josephine Cruz, indicate contact number
Advisor

Mrs. Lynda Hernandez-Avilla
Principal

Copy to: T. Nededog, Activity Coordinator

I give my permission for my child to participate in the SBA Haunted House "American Horror Story". It is understood that my child will need to provide his/her own transportation to and from the activity.

Parent Name and Signature

Date

Parent Contact Information

Student Name