

EVERY STUDENT should complete the information in BOTH BOXES on this page.

Please return by WEDNESDAY, September 18th to your child's classroom teacher. Thanks!

We're getting ready for our annual Walk for FUNds fundraiser to be held during the school day on Friday, October 11th, 2019 and we need your help! Please fill out the information completely in both boxes on this page so we know your child has your permission to participate in our Walk and what size T-shirt to order for them. Fun fitness activities students will be participating in during the Walk include: walking, running, and an obstacle course.

PERMISSION SLIP

My child, _____ (name) in _____
(Teacher's name/Grade Level) class, has my permission to participate in the Boght Hills PTA Walk for FUNds on Friday, October 11th 2019 at Boght Hills Elementary School. I, as parent/guardian of this child, remise, release and forever discharge Boght Hills PTA, the Northeastern Regional NYS PTA and the NYS Congress of PTA and all PTA officers of each of the foregoing, acting officially or otherwise, from any and all claims, demands, actions or causes of action on account of referred.

I hereby certify to the best of my knowledge and belief that said minor is in good health. In case of accident or injury, permission is granted for emergency treatment to be administered. It is further understood that the undersigned will assume full responsibility for any such action, including payment. I hereby advise the above named minor has the following allergies, medicine reactions or unusual physical condition, which should be made known to a treating physician.

Medical Issues that we should know about: _____

If your child has no allergies or other medical issues we should be aware of, please initial here: _____ NONE

Signature of Parent/Guardian _____

Printed Parent Name _____

Phone Number (in case of emergency on 10/11/19) _____

T-SHIRT SIZE

Please note if this form is not received by 9/18, we will order a default size for your child. No child will be left out and all will receive a shirt, but we cannot guarantee the right size will be available if this form is not completed and submitted on time

Child's Name (Please print):

Child's Grade/Classroom Teacher: (Example 3C or 1N)

Please circle your child's T-Shirt size below. EVERY student will receive a shirt and should fill out this information. If your child is between sizes, please select a size up. Thanks!

****CIRCLE 1 SIZE BELOW FOR YOUR CHILD****

Youth Sizes

Adult Sizes

Youth Extra Small (4)

Adult Small

Youth Small (6/8)

Adult Medium

Youth Medium (10/12)

Adult Large

Youth Large (14/16)

Adult Extra Large

Youth Extra Large (16/18)*

Youth Extra Large is wider in the shoulder, but shorter in length than the Adult Small