



ROUND ROCK
INDEPENDENT SCHOOL DISTRICT

Parental Permission for Participation in Elementary Extracurricular Club/Activity

My child/children, _____, has/have my permission to participate in Chess Club, at Spicewood ES for the 2017- 2018 school year.

Sponsor's Name: Laura Reeb Sponsor a Staff Member: Yes

Sponsor's Contact Information: laura_reeb@roundrockisd.org Grade Levels Participating: K-5

Meeting Dates/Times: Fridays 6:35-7:35 AM Meeting Location: Spicewood Library

All RRISD extracurricular clubs and organizations have an adult who will be present at all meetings. Although these sponsors are often a RRISD staff member, due to the volume of extracurricular clubs and activities, some of our groups are led by a parent or volunteer sponsor with no staff member present. For groups with parent/volunteer sponsors, while there will not be a staff member in the room during the meeting, there will always be a staff member present on campus while meetings are taking place.

Student Information:

My child's current grade level: _____ Teacher's name: _____

Medical Information:

My child has the following special medical conditions or issues:

- Medical Conditions Drug Allergies Food Allergies

If yes, list the conditions and/or allergies: _____

Parent Information:

Name: _____ Phone Number(s): _____

Email: _____

Emergency Contacts:

Name: _____ Phone Number: _____

I acknowledge that I have read and understand all of the information provided on this permission form. I agree to assume responsibility for any and all liability arising out of my child's participation in any extracurricular club or activity sponsored by the District.

Parent signature: _____ Date: _____