

Spring Fling Dance!
Friday, March 29, 2019
Euclid School Gym

Pre-K, K and Grade 1: 5:00pm-6:15pm

Grades 2 and 3: 6:30pm-7:45pm

Grades 4 and 5: 8:00pm-9:15pm

Come join your classmates for a fun night of music and dancing!

For the safety of the students, the following guidelines have been put into place for this event:

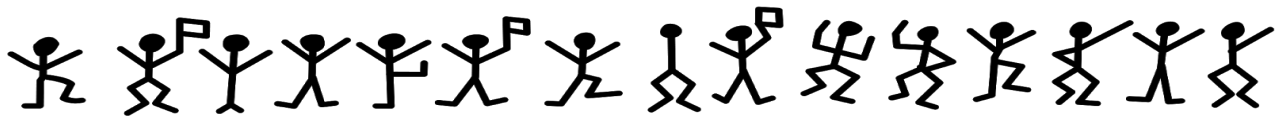
EACH CHILD MUST BE DROPPED OFF AND CHECKED IN BY AN ADULT ON THE SPRING FLING COMMITTEE

- ALL TREATS OFFERED WILL BE ALLERGY FRIENDLY (Peanut/Tree Nut/Egg-Free and Gluten-Free options will be offered). For a complete list of the treats being offered, please email the Chairs of the Event.
- THIS IS A STUDENT ONLY EVENT. SIBLINGS IN MULTIPLE GRADES MAY NOT ATTEND EACH OTHERS' SESSIONS
- AT THE END OF THE SESSION, YOU MUST PICK YOUR CHILD UP AND SIGN YOUR CHILD OUT. NO CHILD WILL BE RELEASED UNTIL A COMMITTEE MEMBER CHECKS THEM OUT. Detailed instructions on pick up procedures will be provided closer to the event.
- **KEYS KIDS** - For any child who is in Kindergarten or 1st Grade and attends the KEYS program, you must sign the attached permission slip and check the appropriate box to have your child released to the PTA staff if they would like to attend the event. If you do not sign the release, your child will not be permitted to attend the Spring Fling until a parent signs their child out of Keys.

A parent room will be available during each session for any parent who would like to remain at the school during the dance.

THE PTA IS NOT RESPONSIBLE FOR ANY ITEMS/JACKETS SENT WITH CHILD

****VOLUNTEERS** - We are in need of parent volunteers to assist. Any parent that is a PTA member and is interested in volunteering, please email Amanda Carullo at amliz@aol.com to sign up. Please indicate which session or sessions you are volunteering for.



SPRING FLING DANCE

FRIDAY, MARCH 29, 2019 - EUCLID SCHOOL GYM

**PLEASE COMPLETE AND RETURN THIS PAGE IN YOUR CHILD'S FOLDER
NO LATER THAN FRIDAY, MARCH 22, 2019.**

****PLEASE PRINT CLEARLY & PROVIDE A PHONE NUMBER WHERE YOU CAN BE REACHED DURING THE EVENT*****

Grade:	Student Name(s):	Grade(s):	Teacher's Name:	Emergency Contact Name and Phone #
Pre-K, K & 1st				
2nd & 3rd				
4th & 5th				

By signing this form, you are giving your child(ren) permission to attend the PTA sponsored Spring Fling.

Parent's Name (Print): _____ E-mail: _____

Signature: _____

KEYS Students ONLY: Please check the appropriate box:

Yes, I give my child permission to be released to the Spring Fling PTA volunteers

No, I do not want my child to leave the KEYS program

Signature: _____