## 2020/2021 MIDDLE SCHOOL STUDENTS

## attending the P.A.L. Program:

I,, am the Parent/Guardian of, child's full name		
١,	Parent/Guardian name	child's full name
and I give		o/from the P.A.L. Program before and/or after school.
Program. My		rting the Middle School Students to or from the P.A.LA.L. Program to Middle School in the morning or from
Alternative to	he risk in my child's participation in this event. I a b Latchkey (the P.A.L. Program) held liable in any a ury, loss of property to the child or children, or da	dverse events including but not limited to the following
•	ase and agree to hold harmless the P.A.L. Program pendently to and or from the P.A.L. Program.	and its employees from any claims arising out of my chi
I have read	l, understand and accept all of the statements re	cited above and accept full responsibility as described.
	Parent/Guardian Signature	Date Signed
	PAL Staff Initials	Date Form Received