

**MONTGOMERY COUNTY PUBLIC SCHOOLS
INTRAMURAL PARENT PERMISSION FORM**

Student's Name _____ Grade _____

I give permission for my child to participate in the after school **Intramural Program** at Rocky Hill Middle School. This program will be held on Tuesdays, Wednesdays, and/or Thursdays from 3:10pm to 4:20pm.
(Days) (Time)

I have indicated below the manner in which my child will be transported home.

_____ Activity Bus

_____ Walk

_____ I will pick up my son/daughter at _____ (time).

_____ Other

(Failure to pick up students on time may result in his/her elimination from the program.)

The activity busses will operate on Tuesdays, Wednesdays, and Thursdays, leaving school at 4:30pm.

(Signature of Parent/Guardian)

(Date)

When the parents are divorced and have legal joint custody, both parents must sign.