

Walnut Grove Elementary School

2520 N White Chapel Blvd., Southlake, Texas 76092

D. Michael Landers, Principal

Allison Fike, Asst. Principal

Haily May Christensen, Asst. Principal

817-949-4400

Dana Gamache, Counselor

Fax 817-949-4444

STUDENT PERMISSION FORM

I hereby grant permission for my child _____ to participate in the Snow Fun Day on January 17, 2020 on the WGES campus. As a part of this event, students will be using tubes to slide down an artificial snow hill behind the WGES field.

I understand that this is a WGES Parent Teachers Organization ("PTO") sponsored event and my child will be supervised by school personnel. I agree that the school, school personnel and/or the PTO and/or its vendors are not to be held liable for any accident or injury sustained by my child.

I hereby authorize Carroll Independent School District to seek emergency medical attention for my child in the event the parent or guardian cannot be reached.

Parent or Guardian (Please Print)

Signature

Mailing Address

City

State

Zip Code

Telephone Number

Cell

Work

Insurance Company

Policy and/or Group #

Please indicate any allergies, physical limitations, concerns, etc.:
