

East Granby Parks and Recreation Presents

Magical Art Mystery Tour

Your child is registered for Magical Art Mystery Tour presented by ART-ventures. This program being held: **Thursdays: 2:55-4:30 pm. For Grades 3-5 at R.D. Seymour School**

- (1st) 6 weeks: October 4 – November 15, 2018 (no class October 25, 2018)
- (2<sup>nd</sup>) 6 weeks: December 13, 2018 – January 17, 2019 (no class 11/22, 11/29 & 12/27)
- (All) 12 weeks: October 4, 2018 – January 17, 2019

Alicia VanNeil, Director of East Granby Parks and Recreation, and/or the class assistant Katie Kelley will be meeting the students at R.D. Seymour School at the end of the day and will sign them out of school and in to the program taking place in the school’s cafeteria. The permission slip below is required in order for your child to be signed out by the Parks and Recreation staff. Class will take place in the R.D. Seymour school cafeteria and pick up of your student is promptly at 4:30pm at the cafeteria.

Please call the East Granby Parks and Recreation Office with questions 860.653.7660.

East Granby Parks and Recreation Presents

Magical Art Mystery Tour

Permission Slip

(Please circle the session that applies to your child’s registration)

- (1st) 6 weeks: October 4 – November 15, 2018 (no class October 25, 2018)
- (2<sup>nd</sup>) 6 weeks: December 13, 2018 – January 17, 2019 (no class 11/22, 11/29 & 12/27)
  - (All) 12 weeks: October 4, 2018 – January 17, 2019

My Child \_\_\_\_\_, Grade \_\_\_\_, Teacher \_\_\_\_\_ has permission to attend the Magical Mystery Tour ART-ventures program being offered by the East Granby Parks and Recreation Department on the dates listed above after school. I understand by signing this permission slip I am allowing Alicia Van Neil, Director of the East Granby Parks and Recreation Office or the classroom assistant Katie Kelley to sign my child out of R.D Seymour School on the dates listed above. I understand that pick up will be at R.D. Seymour School in the cafeteria **promptly** at 4:30pm.

\_\_\_\_\_  
Parent/Guardian Name (please print)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Parent/Guardian cell phone # where you can be reached during the program.

East Granby Parks and Recreation Office, P.O. Box 1858, East Granby, CT 06026 Fax: 860.413.3702