## FIELDSTONE FRIDAYS MEMBERSHIP 5<sup>TH</sup> & 6<sup>TH</sup> GRADE <u>Dates</u>: November 4, 2016/January 6 & March 10 2017

<u>Time</u>: 7:30 – 9:30pm

Student's Name:	
Wh	
Parent's Cell Phone#	Home #
Address:	
Emergency name and phone #	to call for the night of the event if a parent cannot be
reached at the number above:	
I give permission for my child, _ Montvale PTO Fieldstone Friday supplied by the Montvale BOE r	, to participate in the program and adhere to the code of conduct expectations egarding the behavior expectations of students.
This policy is available for reviewhttps://dl.dropboxusercontent.com/20file/5131%20Conduct%20ard	m/u/38413128/Policies/Policy%205000%20to%205999%20pdf
parent/guardian and the \$15 fe event. DO NOT SEND MONEY	tion fee per student. This form filled out and signed by the se will be collected at the door on the night of the first FSF OR FORM INTO SCHOOL PRIOR TO THE EVENT. Cash o tvale PTO) will be accepted for payment.
available to chaperone for one of the parent to assist in chaperonin to Fieldstone Friday's without re	rent of the student attending the FSF events make themselves the scheduled dates. If there is not a reasonable effort made by g, it may result in the cancellation of the student's membership fund of the \$15 membership fee. An email will be sent prior to see please do your best to support this program!
	nbership can be withdrawn if he/she fails to follow the rules of do not meet the chaperone requirements requested of me.
Parent's signature:	
	a the event of an emergency, I authorize the FSF Co-Chair ct on my behalf if I/we or any emergency contact cannot be
Parent's/Guardian's Signature	<b>:</b>

Please complete this form in its entirety and send it with your child and the \$15 payment to the first FSF scheduled event – November 4.

If your child does not have this form filled out by a parent/guardian on the night of the event, he/she will not be allowed to participate.