

Discovery Middle School
Spring 2017, Intermural Session

Child's Name: _____ Child's Grade Level: _____

Home Phone: _____ Emergency/Work Phone: _____

Home Address: _____

Please indicate which one of the following choices with your initial in the blank space:

Will take the district's bus home _____

I will pick up my child at 4:10 p.m. _____

I authorize my child to walk home. _____

I authorize my child to go to day care _____

Day Care Address: _____

Parent Signature

Date

Spring 2017 Intermural Session Choice:
Please pick your 1st, 2nd, and 3rd choice

_____ Calligraphy

_____ Digital Photography

_____ Writer's Workshop

_____ Chess Club

_____ Cooking Club

_____ Homework Club

_____ 6th Grade Girls Group

*****REGISTRATION DUE BY FRIDAY - FEBRUARY 17th ****
RETURN FORMS TO THE OFFICE OR EMAIL MS WESTHORA