



Dear Parent or Guardian,

Your child is signed up for Soccer Roots afterschool Pelada soccer program, and you have requested that s/he walk to the Shelburne Fieldhouse under the supervision of a SoccerShelburne staff member. Please complete the following information, then sign and return the permission slip at the bottom of this form to soccershelburne@gmail.com.

Safe Walk Information:

Pick-up Location: Students will gather near the main office at SCS at 3:00pm on Monday/Tuesday/Thursday, and at 2:00pm on Wednesday (Early Release Day).

Purpose: Supervised walk from SCS to the Shelburne Fieldhouse, to participate in the Soccer Roots Pelada program.

Parents

Save this part of the form for future reference.

Cut here----- Cut here

Sign this part of the form and return it to soccershelburne@gmail.com.

_____ has permission to leave school with a staff member of SoccerShelburne in order to walk to the Shelburne Fieldhouse on (please circle one):

Monday/Tuesday/Thursday at 3:00pm / Wednesday at 2:00pm

I will pick up my child at the Shelburne Fieldhouse after Pelada is finished.

In case of an emergency, please contact:

Name: _____ Phone: _____

Parent/Guardian Signature: _____ Date: _____