

ST. MICHAEL'S SCHOOL MIDDLE SCHOOL SOCIAL PERMISSION FORM

STUDENT'S NAME:	GRADE:
SCHOOL:	
PARENT'S NAME:PARENT'S PHONE:	
I, HEREBY, GIVE MY PERMISSION FOR MY TO ATTEND THE ST. MICHAEL'S SCHOOL M SATURDAY FEBRUARY 24, 2024.	CHILD,, MIDDLE SCHOOL SOCIAL ON
I/WE UNDERSTAND THAT ALL CELL PHONE DOOR.	S WILL BE COLLECTED AT THE
PARENT'S SIGNATURE: (THIS FORM MUST ACCOMPANY THE STUD	·
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