Parent Participation form

YOUNG SCHOOL FAMILY ASSOCIATION

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Dear Parent(s)/Guardian(s):

I have been selected as the homeroom parent for class at the Bernice Young School. There will be four class celebrations this year and I will need your help to make them as much fun as possible for the students.
All party food must comply with the Township's nutrition (N3542.2), anaphylaxis and the management of life-threatening allergies in school policies (S5331). Please refer to the district web-site, www.burltwpsch.org , under policies and regulations for more information.
FOOD containing peanut or tree nuts are NOT permitted into the classroom. Goody bags containing candy or food of any type WILL NOT BE ALLOWED to go home with the students after the celebrations.
Five parents, which include the Homeroom Parent, will be selected for each classroom party. NO siblings (or any age) are permitted to attend any of the classroom parties . Please contact me if you have questions and concerns. Please fill out the bottom portion of this form and return it to the teacher clearly marked with my name. Sincerely,
Telephone Number:
Email:
Return bottom only to the Room Parent
I am available to attend the following celebrations (no siblings, of any age, are permitted to attend):
Fall Celebration (Thursday, October 29, 2015)
My child MAY NOT participate in or dress up for the Halloween Parade on Friday, October 30 th .
Winter Holiday Celebration (Tuesday, December 22, 2015)
Valentine's Day Celebration (Thursday, February 11, 2016)
End of the Year Celebration (June 2016 date to be set by the classroom teacher)
My child has an allergy to the following food(s):
Parent(s)/Guardian(s) Name (Print):
Student's Name:
Phone Number:
Email:
Yes, I give the room parent permission to use the above information to create a class directory that will only be shared with my child's class and their parents for the purpose of communication and setting up get-togethers between new friends.

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