

February 28, 2020

Dear Parent(s)/Guardian(s) of 8th Grade Students,

The end of the year (and the end of the middle school journey) is fast approaching, and we are excited to celebrate with our 8th grade students. Today your child was made aware of the guidelines that must be met in order to attend the 8th Grade Exit Celebration at Main Event in Stafford on Friday, May 15, 2020. Students must return the acknowledgement slip below, the release form on the back of this letter, and either \$20 (no t-shirt) or \$25 (including t-shirt) by May 5, 2020 in order to attend. The fees will cover soda, 2 slices of pizza, a \$10 video game card, unlimited bowling, shuffleboard, billiards, Lazer Tag, and a Gravity Ropes Course (unlimited from 2:30 P.M. to 5:00 P.M.). If your child would like to participate in anything not covered above, he/she will need to bring additional money to cover those costs. **We will leave SLMS around 2:00 P.M. and return to campus by 5:30 P.M. Your child must be picked up by a parent or guardian at Sugar Land MS by 5:30 PM. Students will not be dismissed from Main Event.**

Guidelines to Attend - A student must meet the following criteria in the date range between February 28 and May 15:

- Turn in this letter with the Acknowledgment section at the bottom of this page completed and signed by a parent, the *Field Trip Permission Form* (on the back), and \$20 (without a shirt) or \$25 (with a shirt) to a PTO Volunteer on these dates:
 - iFest / Spring Open House – Tuesday, March 3
 - B & C Lunches - March 5, April 2, April 3, May 4, and May 5
- Receive no more than one (1) "Level I" discipline referral between February 28 and May 15
- Any action deemed inappropriate by SLMS Administration may exclude a student from being able to attend

Thank you for all of your support and hard work the past three years in preparing your child for success at Sugar Land MS and getting them ready for high school. If you have any questions about the guidelines above, please feel free to contact me at 281-634-3113 or Mrs. Smith, the eighth grade counselor, at 281-634-3086.

Sincerely,
Dr. Dawn Rogers, 8th grade Assistant Principal

Acknowledgement of SLMS 8th Grade Exit Celebration Attendance Guidelines

Main Event – May 15, 2020

Please sign acknowledging that you have read and understand the guidelines for attending the 8th Grade Exit Celebration on May 15. Please return this slip, the release form (on the back), and either **\$20 (without a shirt) or \$25 (with a shirt)** to a PTO Volunteer at **iFest on March 3** during B or C lunch on **March 5, April 2, April 3, May 4, or May 5**. Checks must be made payable to SLMS PTO. If you bring cash, please bring exact change. **Note that May 5 is the final date to turn in the forms and fees.**

Parent/Guardian Name (Print)

Parent/Guardian Signature

phone number

Student Name (Print)

Student Signature

Select one:

___ \$20 (no t-shirt)

___ \$25 (including t-shirt; indicate size below all sizes are adult sizes)

___ small ___ medium ___ large ___ X-Large ___ XX-Large

ACKNOWLEDGEMENT OF RESPONSIBILITY AND PERMISSION FOR STUDENT PARTICIPATION IN SCHOOL-SPONSORED TRIP

Student Name: _____

School-sponsored trip to: SLMS 8th Grade Exit Celebration – May 15, 2020 – Main Event

Your child has the opportunity to participate in a school-sponsored trip. Please complete this form to provide the teachers accompanying the students on the trip with information relating to your child.

Teacher: Sugar Land MS PTO Date: May 15, 2020

List any physical limitations (temporary or permanent):

List any current medications (prescribed or over the counter) taken:

List any allergies including reactions to medications, food, insects, and environment:

Name of child's physician: _____ Phone: _____

Insurance company: _____ Phone: _____

Policy Number: _____ Group Number _____

ACKNOWLEDGEMENT OF RESPONSIBILITY

My signature below indicates that I give my child permission to participate in this activity, to have any medications administered that would normally be given at school, and that I authorize any needed emergency medical treatment. I also acknowledge that I have been informed that Fort Bend Independent School District has immunity from any liability. Transportation will be provided by the district or a commercial carrier.

Parent Signature: _____ Date: _____

Address: _____

Home Telephone: _____ Work Telephone: _____

Emergency contact person: _____ Phone No: _____