



Moonlight Masquerade Ball

When: Friday, May 13, 2016

Where: Chamblee Middle School

Time: 5:30 P.M. – 8:30 P.M. Cost: \$10.00

I _____, give
my child,

(Parent's Signature)

_____ permission to

(Print student's first and last name)

attend the "Moonlight Masquerade Ball" 8th Grade Dance at Chamblee Middle School. I do understand that I need to pick my child up in front of the school promptly at 8:30P.M.

_____ will be picking up my
child.

(Please print—relation to student)

Contact's name

_____ Contact's cell
phone# _____

By my signature, I understand that my child needs to be promptly picked up, and I am responsible for

notifying Mrs. Cromer-Nunn in advance if transportation arrangements change. I also understand that my child cannot attend the dance if he/she receives

***In school or Out of school* suspension from April 25 through May 13. NO REFUNDS will be issued.**