

**Extra-Curricular Activities Authorization Form**  
**School/Program: Roxborough**

**School Year:**

Please complete the following statement if you wish to permit your child to sign him or herself in and/or out of the program in order to participate in extra curricular activities offered on school premises. The information required needs to be completed in its entirety to ensure the safety of your child. Children will be released to adults who are assigned to a position which includes student supervision as one of the essential responsibilities.

My child, \_\_\_\_\_, has my permission to participate in

\_\_\_\_\_ located in \_\_\_\_\_  
(Name of activity/program) (room location)

and supervised by \_\_\_\_\_  
Name of adult / position

**As a result, my child will be required to sign into and/or out of the program as specified:**

\_\_\_\_\_ **Into** the childcare program at \_\_\_\_\_ o'clock

\_\_\_\_\_ **Out of** the childcare program at \_\_\_\_\_ o'clock

Beginning: \_\_\_\_\_ Ending: \_\_\_\_\_  
Month/Day/Year Month/Day/Year

Please explain schedule in detail (Ex: every Tuesday, daily, Mondays and Wednesdays):

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I understand that my child must sign him/herself in and out of the program according to program policies, and failure to do so may result in removal of authorization. In this case, a parent or authorized adult would be required to sign my child in and/or out of the childcare program. I also understand that once my child is signed out of the B.A.S.E. program, my child is supervised by the adult specified on authorization form.

Parent / Guardian signature: \_\_\_\_\_ Date \_\_\_\_\_