



4th & 5th Grade Halloween Party
5:45pm- 7:00PM
Friday, October 27, 2017

Dear Parents,

Below is your child's permission slip for the Halloween Dance on Friday, October 27th from 5:45-7:00pm (time change from calendar). The cost is \$5.00 per child. Please return the slip and money in an envelope marked PTA Halloween Dance by October 20, 2017. **THIS IS A DROP---OFF EVENT.** We will have a DJ and will be giving out prizes for great costumes. Each child, if they choose, can walk through the Haunted House. For security reasons, we are asking the parents to come inside the auditorium, find your child's class and sign them in. All aisles will be marked with the teacher's name. Class parents will be there to greet them and escort them into the cafeteria. Please do not bring them into classrooms or cafeteria. Please be on time to pick up your child. You will be picking them up in the auditorium where you dropped them off. We ask that you please be patient during this process. We cannot allow everyone in at once as the children's safety is our number one priority. The volunteers will be there to guide. Thank you for your cooperation! (Note, there is no food at the event. Water will be served).

Please contact Heather Ross at our3muttz@aol.com or 917-270-5250 with any questions.

I give my child _____ in Mr/Mrs _____ class permission to attend the **Halloween Dance on Friday, October 27, 2017 from 5:45 pm to 7:00 pm.**

Enclosed is \$5.00. Please make all checks payable to Boyd PTA in a envelope marked "Attn: Halloween Dance Party" by October 20th.

Parent Name: _____

Parent Phone Number: _____

Parent Email: _____