

**JM ALEXANDER MIDDLE SCHOOL
ATHLETIC EVENT (GAME DAY) PERMISSION FORM**

I give permission for _____ (Please Print) to stay after regular school hours and support the JMA athletic teams. I understand that I am responsible for picking up the above student as soon as the event is over. I understand that if I am more than 10 minutes late in picking up my child, my child loses the privilege of staying for games for the season.

***Each student has to keep this form with them until they are picked up from the event. Games begin at 5:00 PM and end at 6:45 PM.**

(Parent or Guardian)

(Date)

(Phone Number- where I can be contacted immediately.)

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