

I waive any right to claim against ETPRO, staff and teachers, my child's school or school district in the event of an accident, injury or loss of personal items. I understand I am committing to participation in Mindtools and reserving a place in class for the designated session. **Parent's signature**.

PLEASE SEND A NOTE FOR YOUR CHILD'S CLASSROOM TEACHER ON THE FIRST DAY OF SESSION. Please pick up from the designated room.

The PTA is requesting that parents visit at least one class session during all after school programs (outside the final presentation day)—if possible. **Please circle date (s)** that you would be able to attend so we can manage attendance to have even coverage to all sessions with limited seating capacity: 10/12, 10/19, 10/26, 11/2, 11/9, 11/16

Thank you for your participation.