

Lego Club

Who: All Saint Martin de Porres Students in Grades 3 and 4

When: Every Other Monday Afternoon

Where: Saint Martin de Porres

Time: 3:00-4:00 PM

Dates: Beginning September 27, 2011

Cost: \$5.00 per child to help cover the cost of the materials



Beginning September 27, 2011, Saint Martin de Porres School will again begin Saint Martin de Porres School Lego Club for the 2011-2012 school year for all girls and boys in grades 3 and 4 from 3:00 until 4:00 PM every other Monday. Students taking part in this program must registered by completing the attached form and returning it to school no later than Friday, September 16, 2011. This program is sure to be an enjoyable experience for our students and we look forward to them learning as well as having fun.

Saint Martin de Porres School
A Middle States Accredited School

Kathleen A. Leahy
Principal
kleahy.stmartindepores@yahoo.com

122 Cedar Valley Rd.
Poughkeepsie, NY 12603
(845) 452-4428

September 7, 2011

Dear Principal,

Please allow my child _____ in _____ grade to attend the Saint Martin de Porres School Lego Club on Monday afternoons. I understand that my child will attend the program on school grounds immediately following dismissal. I understand that my child will need to be picked up by 4:00 PM or they will be sent to the After School program and all fees will apply. I understand that my child's behavior in this program needs to meet the expectations of the program and that this is a club and not a child care service. I understand that transportation from the program will be provided by myself or the person (s) that I have designated below. I understand that the school authorities will take reasonable precautions against accident, personal injury and loss of, or damage to, property while attending all meetings, but they or the Archdiocese of New York are not assuming any legal liability for any such occurrence except any liability based on their failure to take such reasonable precautions.

My child has permission to be picked up and transported from this program by the following individuals...

Name _____ **Cell phone** _____

Name _____ **Cell Phone** _____

Parents Signature _____

Home Address _____

Home Phone # _____

Cell Phone #'s _____

