

Upper Township Elementary School

Garden Club



ATTENTION ALL UTES Students

Garden Club is an after school program designed to provide students with opportunities to explore their interests in gardening, as well as spend time with peers for hands-on, fun environmental and agricultural education.

Mrs. Traa and Ms. Ay are the Garden Club Advisors.

Garden Club is open to all UTES students and will meet on Mondays and/or Wednesdays depending on number of students from 3:40 – 4:30pm. Grade level meetings and Dates will be sent out as soon as possible.

If you are interested in your student participating, please complete and return the permission slip on the reverse side by Thursday, November 2nd. Slips **MUST** be returned by the 2nd with **NO EXCEPTIONS** as we fill up quickly. We may need to limit the number of participants to 60 students depending on parent volunteers to ensure the best possible experience. All completed forms will be collected by homeroom teachers and forwarded to Mrs. Traa. Students will not be permitted to participate in Garden Club without a signed permission slip. Please note that there are no late buses on Mondays and Wednesdays so, someone must be able to pick up your child promptly at 4:30 on Garden Club days. We will also ask that if your child signs up, that they attend all meetings and you sign up for the REMIND app (info to go home prior to first meeting) so that we can keep you updated with any garden club news, meeting dates, materials needed, schedule changes, etc.....

If you have any questions or concerns, please feel free to contact Mrs. Traa
traa@upperschools.org

We look forward to seeing you soon!



I give my child _____ *(please print first and last name)*
permission to attend Garden Club on the scheduled dates and times at the Elementary
School. My student is in _____'s homeroom.

*Please select how your child will be getting home. Please note that for your child's
safety, if there are any changes, we MUST be notified with a written note otherwise,
they must go home as designated on this form. . Thank you*

___ My child will be picked up by his/her parent(s)/guardian(s)

(names)

___ My child will be picked up by a friend or family member *(please provide name and
number)*.

(Name – First and Last)

(Phone Number)

*** I would be willing to volunteer my time during garden club meetings yes / no

**** *Please provide contact information to be used in the event of an emergency.*

Name of emergency contact/pick up: _____

Phone Number: _____

Parent/Guardian Signature

Date

In the event we need to make 2 groups, we would prefer Mondays / Wednesdays /
doesn't matter (please circle one)