## McReading & McWriting Summer Camp

## **Permission Form**

Student's Name		(first)		(last)
Date of Birth	(month)	(day)	(year)	
Home Phone				
Dad's Name		Cell/Work #		_
Mom's Name		Cell/Work #		
Email			(Circle One: Mother or	Father)
School Attended Las	t Year			_
week, but they will a	fill up fast.	the camp organizers.	here are only twenty spo	·
Please either mail ir school's front office	•		Middle School or drop the	em off at the
Cobb Middle School				
915 Hillcrest Street				
Tallahassee, Florida	32308			
If you have any ques	tions, please feel fre	ee to email Roger McDa	niel at <u>mcdanielr@leonscl</u>	hools.net or

Only one session available: Monday, June 23 - Thursday, June 26 (8:00-12:00) - Incoming 6<sup>th</sup> Graders

Beth McBride at <a href="mcbrideb@leonschools.net">mcbrideb@leonschools.net</a>