Holy Family School 1900 St. Clair Ave. Granite City, IL 62040 618-877-5500 Holyfamilyhawkş.net

September 2019

Dear Parents and Student Council Members,

Holy Family School and the PSA have requested the assistance of our Student Council members at the Great American fundraiser distribution event set for 6:00 to 7:00 p.m. Thursday, Oct. 17, in the school gym.

Students are being asked to help inventory items for parents and assist parents in getting their orders to their cars. Students will check in when they arrive and check out when they finish their shift. An adult Student Council sponsor will be in charge of this procedure.

In the past, the generous service of the students and teacher sponsors have helped the evening run smoothly and efficiently. Our students benefit from all parish fundraisers.

Please sign and return the attached release form and return it to the school by Tuesday, Oct. 8.

If your child is unable to participate, please sign the bottom of the attached sheet where appropriate.

Sincerely,

Margaret Pennell, Principal Amanda Atkins and Cindy Reber, Teachers

STUDENT COUNCIL FUNDRAISER ASSISTANCE RELEASE FORM

I/we request that my/our child (print)	in
Grade be allowed to assist parents by inventorying items and taking items to cars with other students from Holy Family School (hereafter the "Organization") from approximately 6:00 to 7:00 p.m. on Thursday, Oct. 17, 2019. I/we request that my/our child be allowed to participate in this activity because I/we believe that my/our child will benefit both educationally and spiritually. I/we understand that all rules of conduct and standards of behavior, as deemed by the Organization will apply to this activity and we have discussed these with my/our child. In consideration for making this agreement, I/we hereby release and save harmless the Organization and all its employees from any and all liability arising to my child as a result of this activity. My/our child has been informed that he/she is to abide by the rules and regulations including the directions and instructions from the school's administrators, instructors, and supervisors as imposed on students while participating in this activity. This shall include his/her participation in any planning and information sessions and all the prerequisites prior to his/her participation in this activity. In the event that our child fails to abide by the rules and regulations imposed on the student while participating in this activity, disciplinary action may either require that he/she not participate in the activity.	
Emergency Contact / Medical Information:	
(Please Print) Father/Guardian:	Daytime Phone: ()
Mother/Guardian:	Doubling Dhanes ()
Address:	Home Phone: ()
Other Contact Person:	Phone: ()
Medical Insurance Company:	
Company Address:	
Medical Conditions/Allergies:	
Family Doctor:	
We hereby also give our consent for photographs of ou	r child to be taken and released.
Signature of parent/guardian:	
My child	
<u>will not</u> be able to assist with the fundraiser this year.	
Signature of parent/guardian:	Date: