

Dear Parents:

Thank you.

Please complete the movie permission slip below for your student. This will allow your child to watch movies when they are scheduled for both educational and entertainment programs.

Please return this slip to your teacher as soon as possible.

2024-2025 School Year	
I/We hereby permit our child,movies with these ratings:	, to attend
G PG PG-13	
Date:	
Parent/Guardian Signature/s:	