

**KIEL SCHOOL  
GLENN L. SISCO SCHOOL  
KINNELON, NEW JERSEY  
PERMISSION SLIP**

**Dear Parents,**

**During the \_\_\_\_\_ school year there will be several occasions when the children at Kiel and Sisco Schools will be attending special programs at the Kinnelon Public Library, Kiel Fire House, Stonybrook School and the Pearl R. Miller Middle School.**

**You will be receiving notices prior to each of these programs, but if you would like to have your child attend these programs, would you please sign the attached permission slip and return it to your child's teacher as soon as possible.**

**Sincerely,**

**Pat Hart  
Principal**

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**Teacher's Name: \_\_\_\_\_**

**I give permission for my child \_\_\_\_\_  
FULL NAME  
to attend special programs at the Kinnelon Public Library, Kiel Fire House,  
Stonybrook School and the Pearl R. Miller Middle School during the \_\_\_\_\_  
school year.**

\_\_\_\_\_  
**Signature of Parent or Guardian**