

Released Time Consent Form For students of Blue Ridge Middle School

Released Time Bible classes will begin mid-September and end in April. Students will attend class once a week during a related arts class. Students will be transported by bus to the Blue Ridge Christian Learning Center, conveniently located across the street from Blue Ridge Middle School. This consent form will allow your child to attend Released Time all three years (6th,7th,8th) grades at BRMS. If at any time your child wishes to be removed from the Released Time Program, you must send a written note, with a parent signature and contact information to the BRMS front office or call Jenn Nobel, Director at 864-905-5187.

STU	DENT INFORMATION	
STUDENT NAME (First and Last):	CIRCLE ONE: Male / Female	CURRENT GRADE:
Please List any allergies with reaction	s, medications, or important h	ealth information:
PAF	RENT INFORMATION	
PARENT/GUARDIAN NAME (Print)		
ADDRESS:	CITY:	ZIP:
PHONE Home: Cell:	EMAIL:	
EMERGENCY CONTACT: Name:	Phone:	
My signature indicates that I give permission Ridge Christian Learning Center. I understand BRMS for one class period per week for the enbus to the Blue Ridge Christian Learning Cent Advisors. I also give permission for my child twhile attending Released Time Class. My child and or other members of my family responses.	d that my child will be released from tire school year. I give permission fo er. I also give my child permission to to participate in occasional recreation	his/her designated class at or my child to be transported by talk with BRCLC Staff/ nal/sports activities/games
of this organization. These may be used by the publications of GCLC.		
*No, I do not wish that my child	l be photographed	
		_/
Parent/Legal Guardian Signature	Date	

Please turn in permission form to the <u>BRMS Front Office</u> or The Blue Ridge Christian Learning Center <u>(located across from BRMS)</u> or email to: jnobel@greerchristianlearningcenter.org