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Lauren Seidman, Principal  
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### Haynes Bridge School Clubs/Activities Permission Form

Fellowship of Christian Athletes (FCA)

(name of club/activity)

Description of club/activity:

This club meets at the following time(s) Thursday 7:55 AM \*clubs will not meet when school is not in session.  
Students are expected to be picked up by n/a. **\*students who are picked up late will lose the privilege of participating in the activity after the second warning.**

I give my child, \_\_\_\_\_, permission to attend and participate the  
(print student's name)

activities associated with Fellowship of Christian Athletes at Haynes Bridge Middle School.  
(name of club/activity)

I will drop my student off/pick my student up on time. I understand that I am responsible for transportation, and/or allow my student to walk home. I understand that all activities will be supervised by a staff member and conducted on school property.

Parent Name: \_\_\_\_\_ Parent Signature: \_\_\_\_\_  
(please print)

Parent Phone: \_\_\_\_\_ (home) \_\_\_\_\_ (cell) \_\_\_\_\_ (work)

Emergency Contact: \_\_\_\_\_ (name) \_\_\_\_\_ (phone) \_\_\_\_\_ (relationship)

Student Allergies/ Medications: \_\_\_\_\_

Special Needs or Concerns: \_\_\_\_\_

I understand that participation in clubs is a privilege and that my first priority is to focus on my academics. If my grades begin to slip below passing, I may be asked to leave the club until my grades have improved. I also understand that any misconduct on my part will result in removal from the club, and severe misconduct will result in disciplinary action by the school.

\_\_\_\_\_  
(student signature)

\_\_\_\_\_  
(date)