

St. Jude's Spooktacular Halloween Dance

Date: Friday, October 24th 2014 from 7:00 p.m. to 9:00 p.m.

Who's invited: St. Jude students from Kindergarten* to Grade 6.

* For Kindergarten parents only...If you believe your kindergartener will not be comfortable alone at the party, please keep him/her at home or join as a volunteer pre-registered before FRIDAY, OCTOBER 17th. Please contact Michele Kikilidis at 514-943-7266 or by e-mail at michelekikilidis1986@gmail.com

Cost: \$5.00 admission fee (Includes food and drinks) Pay that night.
(Exact change would be appreciated)

All proceeds from the evening will go to cover the cost of the event.

This year we will be doing things a little differently. We are no longer doing fast passes. It will be **admission at the door only**.

What to Wear: Whatever haunting wear you desire but for security reasons, NO MASKS OR WEAPONS! When choosing a costume for your child, please consider that it may be spilled on, the gym gets very warm and that he or she needs to be able to use the washroom in it.

Important Information: As usual, we would ask that all parents ESCORT their children into the school by the main entrance and please keep their outdoor clothing with you. Please note that no student will be permitted to attend the event without a completed permission slip and an adult sign-in at the door. Parents are asked to pick up and sign-out their children no EARLIER or later than 9:00 p.m. No student will be allowed to leave unaccompanied or before 9:00 p.m. They must be picked-up by their parent(s) or a pre-designated person. We greatly appreciate your patience and understanding.

AGAIN THIS YEAR: No parents will be permitted to stay during the dance unless they have been pre-registered and accepted **as volunteers**.

We are sure everyone will have a Howling Gooooood Time!! Hope to see you there!

St.Jude Halloween Party Committee
Brought to you by the PPO

Thank You!

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Information sheet to be returned the night of the dance with all info filled out.

Child's Name _____ Grade _____

Parent's Signature _____

Emergency Tel# _____
(Please be sure that this will be someone reachable during the **entire** time of the dance.) _____

Name of authorized pick-up person(s)*: _____

*For safety reasons a child will only be permitted to leave with the parent whose signature appears here or the authorized pick-up person designated above.