



Permission to leave alone
2019-2020 Season

Parent's name in capital letters

I authorize my child, \_\_\_\_\_,
to leave alone at the end of his/her class for season 2019-2020\*.

Name of the instructor in charge : \_\_\_\_\_

Student's level : \_\_\_\_\_

Form box containing checkboxes for SATURDAY and SUNDAY, and a field for Lesson Time.

We recommend that you communicate frequently
with your child's instructor in order to stay informed
of your child's progression

Parent's signature

Date

\* For all changes regarding this authorization during the 2019-2020 season, please refer to the Snow School Desk. Thank you.