

Shadow Day Permission Slip

We have completed **the online registration** for our child's Shadow Day at Arizona School for the Arts. Our child and members of their family that they reside with have not been ill in the past 24 hours and have not been knowingly exposed to an individual with Covid-19 in the past 2 weeks. Our child now has permission to participate in the Shadow Day events on ______ (date of visit).

The **ASA student dress code** should be adhered to.

- If your child has a school shirt, then we encourage them to wear that on the day of their
 visit. This can be a conversation starter for their shadow and also a point of familiarity for
 other shadows who might be on campus.
- If they do not have a school shirt, then we encourage them to wear their school colors.

Your child should **bring the following** on their Shadow Day:

- 1. A book to read in case tests are administered
- 2. A sack lunch
- 3. This signed permission/waiver form

At 8:15am, we will drop our child off using the Main Gate, which can be accessed from the parking lot on the SW corner of MCDowell Road and 3rd Street. Please do not arrive any earlier than 8:00am as our morning drop-off will impede you from entering the parking lot.

Appropriate courtesy and engagement in classroom behavior is required of Shadows:

- 1. No eating, chewing gum, or sleeping in class
- 2. Raising had to speak
- 3. No cell phone usage
- 4. no wandering around campus

At **2:20pm,** families will arrive to pick up their child and participate in a mock pick-up line using the South faculty parking lot, which you will access from the alleyway off of East Willetta Street. We will refrain from scheduling appointments so that our child can participate in the full Shadow Day experience.

We agree to hold Arizona School for the Arts harmless from any accident or injury that may result from this agreement. Further, we agree that any and all liability, whether civil, criminal or otherwise or any other activity is not assumed and is expressly rejected by Arizona School for the Arts.

Student's Printed Name	Student's Signature
Guardian's Printed Name	Guardian's Signature
Guardian's Emeraency Contact Number	Todav's Date