

Erika Center at St. Ann

Parent Permission Form

I understand my child has been screened for the Erika Center at St. Ann School. My child has been chosen based on teacher recommendation and screening for the program. The financial responsibility for the program is \$3,000 over the school year. Please check ONE of the boxes below. If you do not give permission your child will not participate in the Erika Center at St. Ann for the 2022-2023 school year.

I give permission for my child to receive the reading instruction through the Erika Center at St. Ann School.

I DO NOT give permission for my child to receive the reading instruction through the Erika Center at St. Ann School.

(Parent name – Print)

(Date)

(Parent signature)

(Child's name)

Please email this form back to Jennifer.burnett@sascolts.org or Keara.segarra@sascolts.org. If you have any questions about this process, the Erika Center or your financial obligation please send me an email or call our front office M-Th 8:00-12:00.