

----- RETURN THIS PORTION TO SCHOOL -----



Forensics Permission Slip

PUBLIC SPEAKING & ACTING WITH MLFA WISCONSIN

_____ has my permission to participate in Forensics at North Lake School for the 2024-2025 school year. I understand that the school district will not be held liable or responsible for any injury due to participation. I have read the [North Lake School Extra-Curricular Athletic & Activities Handbook](#).

- I have read the information regarding transportation and will see that my child is at the meets. I understand that the district will not be held liable or responsible for injury due to transportation.
- **I have enclosed the \$125* activity fee.** Please be aware that there will be no refunds of the activity fee after the first meet of the season.
- As a North Lake School Forensic team member, I will remember that I am a representative of my school at all times. I will display good sportsmanship and will be respectful of others.

In case of emergency, here are the contact details:

Name:

Email:

Phone Number:

STUDENT'S NAME

PARENT'S NAME

**There are funding options available for students if there is a need. Please contact Dr. Liesl Ackley for more information.*