

Columbine Community Schools

After School Enrichment

Join us for some after school sports & fun. All events will be in the Community Room. Pickup after class is at Door #10 (west side of the building) **SPACE IS LIMITED**

Crayola Candle

Let's have fun and make a Crayola candle.



(15 spaces)

\$5 | 3:15-4:20 | 1/14 | Wednesdays | Community Room

Mystery Stuff Buddy

Stuff your own mystery buddy, to cuddle in cold weather.



(12 spaces)

\$10 | 3:15-4:20 | 1/16 | Friday | Community Room

Snow Globe

"Shake up the fun! Make your Own Sparkling snow globe!"



(15 spaces)

\$5 | 3:15-4:20 | 1/23 | Friday | Community Room

Cupcake Wars

Who can build the best Cupcake? Decorate a cupcake and have a 'face off' with other Friends.



(15 spaces)

\$5 | 3:15-4:20 | 1/28 | Wednesday | Community Room

Sand Art

Mix, play & take home your Own sand art masterpiece.



(15 spaces)

\$5 | 3:15-4:20 | 1/30 | Friday | Community Room

Questions please call/txt
(720)964-3613



Community Schools
Excellence in Childcare and Enrichment

Columbine Community Schools

Check all that your child will be attending:

- ☐ Crayola Candle- Wednesday, 1/14
- ☐ Mystery Stuffy - Friday 1/16
- ☐ Snow Globe - Friday 1/23
- ☐ Cupcake Wars - Wednesday 1/28
- ☐ Sand Art - Friday 1/30

Fees per child:

- ☐ \$5
- ☐ \$10
- ☐ \$5
- ☐ \$5
- ☐ \$5

Include payment with form.

One form for each child Student:

Total Included:

Student's name: _____

Parent's name: _____

Best Phone: (C) _____

Grade _____/Teacher _____

☐ I will pick up my child after class **(you will need to come in and sign your child out)**

☐ My child has permission to walk home after class

Does your child have an individualized plan such as an IEP, 504, or IHP? ☐ Yes ☐ No

Does your child require the administration of any medications while participating in this event?

☐ Yes ☐ No

If your child has allergies, please specify what kind? _____

Photo Release: I give permission for the St. Vrain Valley School District (and any person or company authorized by the District) to take, use and copyright photographs, film, video, and/or recordings taken of this student by District staff (or their representatives) and understand that the District may use reproductions, alterations, or additions to them. I also understand that these reproductions may include authorized District websites and school district publications.

Iniciales: _____

Hold Harmless: I give my permission for my child to participate in this activity. I acknowledge that participation in this activity involves some risk of injury or death, and I assume these risks. I further acknowledge that my child is physically capable of participating in this activity. I release and hold harmless the St. Vrain Valley School District and its personnel from liability for injury or death arising from this activity.

Parent Signature: _____ Date _____