

NASSAU
COUNTY



ROOSEVELT UNIT
P.O. Gary Boulanger, Director

POLICE ACTIVITY LEAGUE

104 Nassau Rd, Roosevelt, NY 11575

Mailing Address: P.O. Box 162, Roosevelt, NY 11575
Phone: 516-867-4182 Fax: 516-867-4980

June 1, 2009

Dear Parent/Guardian:

Welcome to the Roosevelt P.A.L. Summer Program 2009! We anticipate an exciting summer program. One of our main highlights in the summer program is swimming. We have planned to use local facilities to engage in this activity. However, parental consent is required for campers to participate in this recreational activity.

Thank you for your continued support. If you have any questions or concerns, please contact the office. If you are interested in the program please complete the form below.

Sincerely,

Todd Parrish
Director

I give my child _____ permission to participate in the
SWIMMING PROGRAMS offered at the Roosevelt P.A.L. Summer Camp 2009.

Parent/Guardian Signature

Date

IT IS BETTER TO BUILD YOUTH THAN TO MEND ADULTS

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