

# BRITTEN SCHOOL

10110 Gladstone Street, Westchester, IL 60154-2618

Phone: 708-343-7500 Fax: 708-343-0363

I, the parent/guardian of \_\_\_\_\_, a student at Britten School, give permission for him/her to participate, if selected, in any or all of the three programs of the Britten School Student Community Service Program for the 2016-2017 school year: Westchester Food Pantry, Oak Park Animal Care League, and Westchester Health and Rehabilitation Center.

I understand that the community service projects are a mandatory component of the school curriculum. I understand that the program is operated under the supervision and control of Britten School during the school day. I agree that my child's participation can be withheld if for some reason the school determines that my child should no longer participate. In the event that my child is withdrawn from the service program, I will be notified.

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**Parent/Guardian Signature**

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**Date**

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**Student Signature**

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**Date**