



Vale Elementary

Name: _____ Date of Birth: _____

Email: _____

Address: _____ City: _____

Zip: _____ Home Phone: _____

Cell Phone: _____ Work Phone: _____

Student's Name(s):

Teacher(s):

(Signature):

(Date):

Please return this form to one of the following locations:

1. Drop the form off at the office or with your student's teacher.
2. If you have questions, please contact **Vale PTO: CashmereValePTO@gmail.com or contact the Watch D.O.G.S. Coordinator at 509-312-2990 / Nick.Wood323@gmail.com**

Vale Watch DOGS Sign Up

Name: _____

AM/PM Shift Before and After School Playground and Bus Drop Off:

_____ 7:45-8:30 Dates: _____

_____ 2:45-3:30 Dates: _____

Lunch/Recess Shift:

_____ 11:15-12:45 Dates: _____

Watch Dog Schedule by Grade:

(See Vale Watch DOGS Schedule)

Kindergarten

_____ 12:00-3:15 Dates: _____

First Grade

_____ 11:45-3:15 Dates: _____

Second Grade

_____ 11:40-3:15 Dates: _____

Third Grade

_____ 7:45-11:55 Dates: _____

Fourth Grade

_____ 7:45-12:00 Dates: _____