

THERE IS POWER IN POSITIVITY
"BE THE CHANGE"
With Miss Levine & Miss Sangemino's

GOOD  IBE TRIBE

Open to 6th-8th grade students - first come first serve!

Objective: To make ourselves, our peers, our school, our community, and our world a better place - **one random act of kindness at a time!** This Club is for students who want to BE THE CHANGE and create a positive chain reaction at SCMS.

Why? There is power in positivity. Kindness has the ability to increase happiness, self-esteem and optimism, improve mental and physical wellbeing, lower stress and anxiety levels, create better social, emotional and academic outcomes, and reduce bullying in schools as well as the community.

We will be meeting on Mondays, twice a month throughout the school year
(see reverse for tentative schedule)

Good Vibe Tribe Dues are \$5.00 - CASH ONLY - due at the first meeting. Monday, 11/25/19

Participant Name: _____ Grade: _____

I give permission for my child (named above) to attend the Schuyler-Colfax Middle School Good Vibes Club. I understand the club meets after school from **3:00 - 4:00pm** and I will arrange for prompt transportation as late pick-up will result in *dismissal from the club*. Clubs will not meet when school is not in session!

***Please note: All participants must demonstrate good behavior! Students may be dismissed from the Good Vibe Tribe at any time due to misbehavior during school or at club at the Miss Levine/Miss Sangemino's discretion. This Club is a privilege, not a right!**

Parents please join REMIND to receive Good Vibe Tribe Club notifications directly to your phone! Text this number "**81010**" this message "**@662a3e3**" to start receiving notifications.

If you have any questions or concerns, please contact Miss Levine via email @ slevine@wayneschools.com or Miss Sangemino at asangemino@wayneschools.com

ALL PERMISSION SLIPS MUST BE RETURNED TO MISS SANGEMINO'S MAILBOX BY FRIDAY, OCTOBER 18th



PLEASE FILL OUT BACK OF PAPER & RETURN





EMERGENCY CONTACT INFORMATION



Student Name: _____ Student Grade: _____

Student D.O.B: ____/____/____ Age: _____ HR Teacher: _____

Student Allergies: _____

Address: _____

Please indicate Parent Pick Up, Walker/Biker: PICK-UP WALKER/BIKER

My child may also ride home with: _____

(No deviations without written instructions)

Guardian Name: _____

Guardian phone: (Cell) _____ (Home) _____ (Work) _____

Guardian Email (please print clearly): _____

Emergency Contact Name/Relation: _____/_____

Emergency Contact #: _____

Parent/Guardian signature: _____



November

Monday, 11/25/19 - 3:00pm - 4:00pm
*(*Permission Slip & \$5 is due*)*

DECEMBER

Monday, 12/09/19 - 3:00pm - 4:00pm
Monday, 12/16/19 - 3:00pm - 4:00pm

JANUARY

Monday, 01/06/20 - 3:00pm - 4:00pm
Monday, 01/27/20 - 3:00pm - 4:00pm

FEBRUARY

Monday, 02/03/20 - 3:00pm - 4:00pm
Monday, 02/24/20 - 3:00pm - 4:00pm

MARCH

Monday, 03/02/20 - 3:00pm - 4:00pm
Monday, 03/16/20 - 3:00pm - 4:00pm

APRIL

Monday, 04/20/20 - 3:00pm - 4:00pm
Monday, 04/27/20 - 3:00pm - 4:00pm

MAY

Monday, 05/04/20 - 3:00pm - 4:00pm
Monday, 05/18/20 - 3:00pm - 4:00pm

