Wayland-Cohocton Central School

MISSION: ***To ensure high levels of learning for all students.***
VISION: ***To continuously develop our capacity to function as a collaborative culture.***

Excellence Starts Here!

Dear Parent/Guardian,

We are excited to offer an Inclusive Elementary Sports Camp for our students! This camp is designed to provide a fun, supportive environment where all students can participate in a variety of physical activities, build skills, and enjoy being active together.

Camp Details:

- **Dates:** April 16, 17, 23, 24, 30, and May 1, 2026
- **Time:** 3:30 PM – 4:40 PM
- **Location:** 59 Gym, Wayland Elementary School

This camp is being organized and led by a high school student as part of her Capstone Project for her Civic Engagement and Democracy class. The program will be supported by both adult and student helpers to ensure a safe and inclusive experience for all participants.

Important Information:

- Students must be picked up by a parent/guardian at the elementary entrance #1 by **4:40 PM**.
- Please ensure your child is dressed appropriately for physical activity (sneakers, comfortable clothing).

We ask that you **RSVP by sending in this parent permission form back to the elementary main office by 04/01/2026**. If you have any questions, please feel free to contact Jackson West at jwest@wccsk12.org or Katherine Wolcott at kwolcott@wccsk12.org.

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Inclusive Elementary Sports Camp Permission Slip

Student Information:

Student Name: _____

Grade/Classroom: _____

Parent/Guardian Information:

Name: _____

Phone Number: _____

Emergency Contact (if different): _____

Emergency Phone Number: _____

Medical/Allergy Information (if applicable):

_____

_____

Permission:
I give permission for my child to participate in the Inclusive Elementary Sports Camp on the dates listed above. I understand that my child must be picked up promptly at dismissal and that participation involves physical activity.

Parent/Guardian Signature: _____

Date: _____