



FRIDAY, DECEMBER 7TH

PARENTS' NIGHT OUT

STUDENTS NAME: _____

GRADE & TEACHER: _____

ALLERGIES: _____

PARENT/GUARDIAN PHONE#: _____

PARENT/GUARDIAN EMAIL: _____

**Games, DIY Squishy,
Pomanders, Classic
Holiday Movies, Pizza
Meal, & Popcorn**

**For: Shaul Elementary
Students grades K-5th**

**Time: 3:45 pm (after
school) – 7:30 pm**

**Cost: \$5.00 per
student. Send all
payments in an
envelope labeled with
child's name and
Parents Night Out.
Make checks payable
to Shaul PTO, note
student name on
bottom of check.**

**Please return bottom
portion of flyer with
completed information
by December 3rd.**

**REGISTER EARLY –
Space is limited to the
first 200 students!**

**You may bring a blanket
if you wish.**