

THE Cornwell Center



2001 Selwyn Avenue, Charlotte, NC 28207
www.cornwellcenter.org
704-927-0774

SELWYN ELEMENTARY SCHOOL

I, _____, give permission for my child, _____
(please print name) (please print name)

to ride the Myers Park Baptist Church van from Selwyn Elementary School to The Cornwell Center for the After School Program. If my child will not be riding the Myers Park Baptist Church van, I will provide written notification to Selwyn Elementary School and The Cornwell Center.

Teacher Name _____

Room Number _____

First Day of After School _____

Parent/Guardian Signature _____

Date _____