



**STUDENT COUNCIL PAINT NIGHT**  
**Come paint a picture with us!**

The HTS Student Council is sponsoring a night of painting and fun for 2nd and 3rd grade students at Holland Township School!

WHEN: Friday, February 21st, 2025 from 6:30 p.m. to 8:30 p.m.

WHERE: HTS Auditorium

COST: \$10

(This fee will cover the cost of materials including the canvas and paint.)

**Popcorn and water will be provided.**

**SPACE IS LIMITED FOR THIS EVENT!**

Pre-Registration is required for this event. Please fill out the permission slip below and return it with a \$10 payment by Thursday, February 13th.

**Supplies will be pre-ordered for this event.**  
**We will not be able to accept late permission slips.**

Please contact Ryan Pfenning ([rpfen@hollandschool.org](mailto:rpfen@hollandschool.org)) x6229 or Jen Leap ([jleap@hollandschool.org](mailto:jleap@hollandschool.org)) x6317 with any questions!

# HOLLAND TOWNSHIP SCHOOL DISTRICT

Mrs. Stephanie Snyder, Superintendent  
Mrs. Susan Wardell, Principal/Curriculum & 504 Coordinator

908-995-2401  
[www.hollandschool.org](http://www.hollandschool.org)

## PAINT NIGHT PERMISSION SLIP 2nd and 3rd graders

Dear Parents and Guardians,

The Holland Township Student Council is hosting a Paint Night on Friday, February 21st from 6:30 p.m. to 8:30 p.m. All 2nd and 3rd grade students are invited to attend.

The cost of the event is \$10 per child. Water and popcorn will be provided.

Please fill out the information below and send the permission slip back with payment by Thursday, February 13th. Staff chaperones and Student Council members will be present at this event. Thank you for supporting our Student Council!

Sincerely,

Ryan Pfenning & Jen Leap  
Student Council Advisors

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### Paint Night Permission Slip

Please return this portion of the form by Thursday, February 13th.

I give permission for my child to attend the Student Council Paint Night on Friday, February 21st from 6:30 p.m. to 8:30 p.m.

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

Parent Contact Name: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Allergies: \_\_\_\_\_