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**B**rooklyn **L**ab **S**chool

[www.brooklynlabschool.org](http://www.brooklynlabschool.org)

**CLUBS**

Date: \_\_\_\_\_

Dear Students and Parents

**Student:** \_\_\_\_\_

Congratulations! You have been selected to be part of **BLS Clubs**. All BLS clubs meet **Monday thru Thursday from 3:15 PM to 4:15 pm**. We have a variety of after school clubs and are encouraging all students to partake in some after school activities. Please visit our website: [www.brooklynlabschool.org](http://www.brooklynlabschool.org) for further information.

**BLS CLUBS meet from 3:15 PM – 4:15 PM on the following days**

\_\_\_\_\_ Mondays

\_\_\_\_\_ Tuesdays

\_\_\_\_\_ Wednesdays

\_\_\_\_\_ Thursdays

**“Brooklyn Lab School is a collaborative learning community devoted to sustaining strong character, intellectual inquiry, college readiness, and lifelong learning for all.”**

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By signing this contract, you are making a commitment to participate in BLS Clubs.  
 If you have any questions, please feel free to contact us at (718) 235-3592.

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Please sign, detach and return to either your **mentor** or **grade team advisor**.

Student's Name \_\_\_\_\_

Class \_\_\_\_\_

Student's Signature \_\_\_\_\_

Parent's Signature \_\_\_\_\_

Emergency Contact Number \_\_\_\_\_