



11-19-16

PERMISSION FORM

I, _____, give my child, _____, permission to attend Bowling Night with St. Charles Teen Club on Sunday November 19, 2016 from 7-9 PM at Rab's Country Lanes. I hereby release St. Charles parish, priests, staff and volunteers of liability in the event of accident or injury in relation to this event. Please list any medical conditions or food allergies your child may have in case of emergency:

x _____ Date _____

Contact Information:

Name: _____

Relationship: _____

Phone #: _____

Please return the permission slip and bowling fee in an envelope marked with the teen's name and "Teen Club" by November 18th