



1-22-17

## PERMISSION FORM

I, \_\_\_\_\_, give my child, \_\_\_\_\_, permission to attend Bowling Night with St. Charles Teen Club on Sunday January 22, 2017 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 return signed form by January 15, 2017

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Please list any medical conditions or food allergies your child may have in case of emergency:

\_\_\_\_\_

x \_\_\_\_\_ Date \_\_\_\_\_

Contact Information:

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone #: \_\_\_\_\_