## **WBC Event Permission Form**

Dear Parent or Guardian, Your student is participating in Lunch and Altitude with Woodlawn Baptist Church. **Event Information:** Date(s): Sunday, February 25 (12:15-3:15PM) Location of Event:Lunch(4600 Menchaca) Altitude (6800 West Gate Blvd, Austin) Means of Transportation: Woodlawn Bus Leave Woodlawn: <u>12:50pm</u> Arrive back at Woodlawn: <u>3:15pm</u> I, \_\_\_\_\_ (parent or guardian's name) give \_\_\_\_\_ (student's name) to attend this event and approve of the means of transportation. I give my permission for (student's name) to receive emergency medical treatment. In an emergency, please contact: Name: \_\_\_\_\_\_Phone: \_\_\_\_\_ Parent/Guardian Signature: \_\_\_\_\_\_Date: \_\_\_\_\_