Event Permission Form

Dear Parent or Guardian,

Your student is participating in <u>Mission Monday and Lunch</u> with Woodlawn Baptist Church.

Event Information:	
Date(s): Monday, March 11	
Location of Event: Church Mem	bers Homes
Purpose: Serving others within t	the church and lunch
Means of Transportation: Perso	nal Vehicles that have are on the approved drivers
Leave Woodlawn: <u>9:00am</u>	Arrive back at Woodlawn: 1:00pm
I,	(parent or guardian's name) give
permission for	(student's name) to
attend this event and approve o	f the means of transportation. I give my permission for
	(student's name) to receive emergency
medical treatment. In an emerg	ency, please contact:
Name:	Phone:
Parent/Guardian Signature:	Date: