

Permission for St. Andrew's Youth Group Event
at _____
on _____

I am the parent/guardian of _____.

I hereby give my permission for him/her to attend the above event.

This consent is governed by the terms and conditions of the attached St. Andrew's Youth Group 2011-2012 Medical Release and Permission form. I certify that the health insurance and other information on the attached form is complete and accurate.

Signature

Name

Date