

Parent/Guardian Permission

Centerpoint Community Church Youth Event

PLEASE RETURN BY:

_____ has my permission to attend _____
(student name) (event name)

with Centerpoint Community Church on _____
(event date and times)

I can chaperone & drive. I have ___ seatbelts for youth.
(please have current registration and insurance)

I can chaperone, but cannot drive.

Sorry, I cannot chaperone.

Event Cost: _____

Deposit enclosed

Full amount enclosed

Parent/Guardian Print Name

Signature

Contact number during event

Alternate emergency contact name & number _____



Questions? Contact Zack Crowell
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