

Parent Permission Slip

My daughter _____ has permission to participate in Reach for the Stars Dance Workshop at Seven Star School of Performing Arts 509 Route 312 in Brewster, NY held on Saturday, October 7th 5-6:30PM.

In case of emergency, notify: _____

Phone: _____

Relationship to girl: _____

In an emergency, when either myself or the person named above cannot be reached, I hereby authorize the adult in charge to take any action believed necessary for the best interest of my daughter, including emergency room treatment.

List allergies: _____

Photo and Website Use Release: I authorize the use of any pictures taken of my daughter at this event for the purpose of promoting Girl Scouting and/or Seven Star School of Performing Arts.

Parent Name: _____

Parent Phone: _____

Parent Email: _____

Note: There will be workshop presentation for parents a 6:15PM

Parent/Guardian Signature _____

Date _____

Parent Permission Slip

My daughter _____ has permission to participate in Reach for the Stars Dance Workshop at Seven Star School of Performing Arts 509 Route 312 in Brewster, NY held on Saturday, October 7th 5-6:30PM.

In case of emergency, notify: _____

Phone: _____

Relationship to girl: _____

In an emergency, when either myself or the person named above cannot be reached, I hereby authorize the adult in charge to take any action believed necessary for the best interest of my daughter, including emergency room treatment.

List allergies: _____

Photo and Website Use Release: I authorize the use of any pictures taken of my daughter at this event for the purpose of promoting Girl Scouting and/or Seven Star School of Performing Arts.

Parent Name: _____

Parent Phone: _____

Parent Email: _____

Note: There will be workshop presentation for parents a 6:15PM

Parent/Guardian Signature _____

Date _____

