

Permission Slip

I, _____, give my son/daughter _____ permission to attend any and all activities scheduled through the Band Department for the 2009-2010 school year. I understand that this permission slip will cover all events already scheduled and those that are TBA.

Allergies/Medical Conditions: _____

Medications: _____

Emergency Contact: _____ Phone: _____

Date: _____

Signature of Parent or Guardian