

**St. John the Baptist Church
Religious Education Department
and Youth Ministry
2028 Sandridge Road
Alden, New York 14004
(716) 937-3448**

www.stjohnalden.com

Off Ground Permission Slip

I, We, the parents/guardians of, _____ request that our child be allowed to participate in:

Name of activity: **X L T PRAISE AND WORSHIP**

**Christ the King Seminary
St. John Vianney Chapel
711 Knox Rd.
East Aurora, NY 14052**

Date of activity: **Friday, December 18, 2015 7-9 pm**

I/We give permission for our child to attend. In consideration of my child's participation, I hereby release, save harmless and indemnify the parish, its employees and agents from any and all liability for any injury resulting from ordinary negligence.

I/We understand that transportation will be provided by a volunteer driver.

Parent/Guardian print name _____

Parent/Guardian Signature: _____

Date _____

Telephone Number in Emergency: _____