

PERMISSION FORM

Dear Parent or Legal Guardian,

This form needs to be filled out for your youth, grade 6-12, to watch the "older kid movie" at the Movie Potluck.

A description of the event follows:

Name of Event: Movie Night/Potluck

Date(s) of Event: Saturday, February 9, 2019

Activities involved in event: Watching *ANT-MAN and the WASP* (PG-13)

Event takes place at: St. Joseph the Worker (Youth Room)

If you wish your child to participate in the above event, please read completely, sign, and return the following statement of consent and release of liability:

I request that my child be allowed to watch *ANT-MAN and the WASP*, described above. I

**grant my permission for _____
(Youth Name/Names)
to watch this movie and understand that it is PG-13.**

Signature of Parent/Guardian If there are two custodial parents, both need to sign date

print parent/guardian name phone

address city, state, zip

Please return this form by: February 8th or bring to the event