

Willett Elementary School PTA
Peace Out 6th Grade Celebration Permission Slip

Student Name: _____ School: Willett Elementary School

Parent/Guardian Name _____ Telephone Number: _____

Emergency Contact + Telephone #: _____

Destination: Willett Elementary, Davis CA Date: June 7, 2022

Suggested Donation: \$10 per family, Venmo @Kim-Saban, cash or check to Willett PTA

Expected Start time: 6:00 pm End time: 9:30 pm

I, the parent or guardian of named of the child understand that this event can be dangerous and that personal injury can occur. If I am not present at the event, I authorize the PTA volunteers of Willett Elementary School to seek and consent to such medical attention at the above named event to the participant as needed and that I shall be responsible for any and all costs associated with such treatment.

I, the parent or guardian named below, undertake and agree to release, indemnify and hold blameless the PTA volunteers, Willett Elementary, its Teachers and Staff from and against any and all liability, loss, damage or injury (including death) suffered by the participant as a result of participating in this event, as well as of any medical treatment authorized by the PTA volunteers of Willett Elementary School.

I, the parent or guardian named below agree to pick up my child by 9:30 pm. If I cannot be there, I allow a named parent (MUST BE TYPED IN FORM) to pick up my child.

I hereby understand and agree to the above statements:

Parent or Guardian Signature: _____ Date _____