

JANUARY 24, 2020 PILGRIMAGE TO THE MARCH FOR LIFE IN WASHINGTON D.C. PERMISSION FORM
FOR TEENS (13-18 YEARS OLD) ATTENDING WITHOUT PARENTS

NAME OF STUDENT: _____

STUDENT'S AGE: _____

ADDRESS OF STUDENT (INCLUDE TOWN AND ZIP CODE):

STUDENT'S CELL PHONE NUMBER:

EMERGENCY PARENTAL CONTACT NUMBER (AND NAME OF PARENT):

DOES YOUR CHILD HAVE ANY ALLERGIES? _____

PLEASE LIST ANY ADDITIONAL HEALTH CONCERNS:

(TEENS MUST ALSO READ AND SIGN THE CODE OF CONDUCT LOCATED ON THE BACK OF THIS FORM. THANK YOU.)

FEE: \$10 PER PERSON/ \$20 PER FAMILY

PAID _____ DATE _____ CASH OR CHECK (OLS RESPECT LIFE MINISTRY)

FORMS AND FEE CAN BE DROPPED OFF WITH PAYMENT AT THE RECTORY OFFICE, OUR LADY OF THE SNOW, 175 BLUE POINT AVENUE, BLUE POINT, NY 11715. (ATTENTION LOREN CHRISTIE)

I, _____ (FULL NAME OF PARENT) GIVE PERMISSION FOR

MY SON/DAUGHTER (NAME OF STUDENT) _____ TO ATTEND
THE 47TH ANNUAL MARCH FOR LIFE IN WASHINGTON, D.C. ON FRIDAY, JANUARY 24, 2020.

PARENT SIGNATURE:

DATE: _____