BIG PAL LITTLE PAL

Little Pal Individual Event Permission Form

Date	Time: Pick up/Return	
Location/Event		
Contact Number		
Transportation		
Notes		
Child's Name:		

Emergency Contact Number:
Cell

Liability Waiver...I, being the parent or legal guardian of the child listed above, do hereby give my permission for this child to attend and participate in all Big Pal Little Pal activities for the dates mentioned. I am aware of the nature of these activates and liability and agree to hold harmless Big Pal Little Pal, Lee University, The Boys & Girls Clubs of Cleveland, their Boards of Directors and members, employees, staff, volunteer, and other representatives associated with them and the activities. I also do give my explicit permission to sponsoring adult(s) to administer first aid and to seek and obtain further emergency medical treatment for my child as deemed necessary.

Date:

Parent/Guardian Print Name: _____

Parent/Guardian Signature: _____