## Childrens Choir Permission Slip 2020-2021

## STUDENT PORTION (form must be completed by <u>each</u> participant)

Ihave chosen to	participate in St.	Gregory the Great Childre	ens Choir this academic
(Print Student Name)			
year. I promise to treat my fellow musicians and director fairly	and with respe	<u>ct</u> . I understand that I am	expected to work hard
and always give my best effort.			
Student Signature		School	Grade
PARENT/GUARDIAN PORTION			
I hereby give (child)	permission to participate with the		
St. Gregory the Great Parish Childrens Choir.			
I grant permission for my child to take part in St. Gregory	ory the Great Ch	ildrens Choir	
• I will support my child's participation by making sure he/she attends rehearsals, liturgies, and performances on time.			
• I will make every attempt to inform of absences in advance whenever possible or follow up with a note, email, or			
Parent/Guardian Name(s) (Print legibly):			
Email	Home Phone ()		
Cell Phone (Mom)	Cell Phone (Dad)		
Work Phone (Mom)	Work Phone (Dad)		
Address	_City	Zip	
In case of emergency, best form of contact (Home Phone, Email, Cell)			
PARENT INITIAL REQUIRED:			
I allow my child to play out on the grass with other students during breaks in rehearsal.			
I allow my child to be photographed and / or audio	or visually recor	ded for the purposes of t	he church or school web
site, church bulletin, and / or recruitment.		aca for the parposes of t	
I allow my child to enjoy a snack or treat which on c	ccasion may be	served at rehearsal. I hav	ve listed food allergies on
this page.	,		C
Allergies:		EpiPen	□ Yes □ No
Parent /Guardian Signature		Date	

Please return this completed form to the parish office or email musicministry@stgg.org with subject Attn: Childrens Choir