



Youth Group Attendee Information

Name: _____

Grade: _____

School: _____

Parent Email: _____

Parent Cell: _____

Contact Permission

Please read the following statements and initial next to each for which you grant permission. A parent or second chaperone will be included in all forms of communication. Complete by signing and dating at the bottom of this form. You will also need to sign and return a photo release form. Thank you!

_____ I grant Saint Mary permission to contact my child via text message. (High school students only)

_____ I grant Saint Mary permission to contact my child via email or other social media.

Parent Name (Print) _____

Parent Signature _____ Date: _____