

FAITH

STUDENT MINISTRIES

800 Wenzel Road, Peru IL 61354

FSM LATE NIGHT PERMISSION FORM (Return by 01/23)

I give my teen(s) _____ permission to
(teen's name (s))

go to FSM LATE NIGHT at Faith Church in Peru

on **Friday, January 25 from 6:00PM - 11:00PM.**

Doors open on **Friday at 6:00 PM**, and students are expected to be picked up promptly at **11:00 PM**. If you have any questions, please feel free to call Pastor Brenden McDonald at (417) 693-1941.

Thank you.

1. Is your teen allergic to anything? _____
2. Can your teen take Tylenol? _____
3. Is your teen taking any medication now? _____
4. In case of an emergency, I can be reached at _____ (Phone)
5. Our doctor is: _____
Address & Phone: _____
6. If I cannot be reached in an emergency, please contact: _____

In the event of an emergency occurring where I or the above-mentioned cannot be reached, I give Pastor Brenden McDonald or a Leader my permission to make decisions for the treatment of my teen(s).

Parent's Signature _____ Date _____