

# Release Form for Participation in FLOCK After-PSR Activities

Parents/Guardians:

To assist us in the protection of your children during our care, please submit to Mrs. Wendy Enloe, Director of Religious Education, or to Tammy Vidrine, Youth Ministry Coordinator, before or on the said event. This will prevent any chaos or confusion. Thank you for your cooperation.

May God Bless You and Your Little Ones,

Wendy Enloe

Tammy Vidrine

Father Jon

I, \_\_\_\_\_, release my child/children, \_\_\_\_\_

\_\_\_\_\_, to participate in the FLOCK Activity on

(date) \_\_\_\_\_. I understand that it is my responsibility to pick up my

child/children after the activity and sign him/her/them out. In the event that this form was not submitted before or on the night of the activity, I understand that my child will not be allowed to participate.

Parent/Guardian Signature \_\_\_\_\_

Contact Number \_\_\_\_\_