## **Via Colori Street Painting Festival 2018**



## **MINOR CONSENT FORM**

School/ Organization Name:Date:Date:		Date:	
I, as Parent or Guardia	n, Give Permission for		
(Student's First and Last Name)  o Attend:		s First and Last Name)	
TO Attend.			
	Via Colori Street Painting Fe	<u>estival</u>	
	Time: Saturday, November 17 and Sund hild will be a volunteer at this event on be Day and shift time varies (Please allow time for transportation to ar	ehalf of their service club. s.	
I understand that my chi participating in this field	•	ool rules and by the code of discipline while	
	lness or injury to my child/ward, I expressly binion of attending medical personnel, such		
Further, I authorize parent of my child/ward	(Teacher's/S <sub>l</sub> while participating in the above described fi	ponsor's name) to act on my behalf as eld trip/program.	
Furthermore, I give my f photographs or video tal	ull permission for the Center to photograph ken during the festival.	my child and to use, publish and re-publish	
	ed General Volunteer rules and reviewed nderstand its terms. I sign it voluntarily a		
Parent's/Guardian's Sig	nature:		
Relationship to Minor: _			
Address:			
	Street	Apt. #	
City:	State:	Zip Code:	
Telephone #:	Alt Telephone	Alt Telephone #:	
Emergency Contact (so	meone other than yourself):		
Emeraency Telephone N	Number:		