

This is to verify that my son/o	daughter			_
	(Please print).	First	Last	
Is permitted to check himself	herself out of th	e:		
[] Sunday School pr	ogram that ends	at 10am		
[] KidsCONNECTION	I program that er	ids after the	morning service	
By checking the above box(es	s), I, the parent/g	uardian of		
	will assu	me all respor	nsibility for him/her while o	n
the church premises after the	e program has en	ded.		
Signed			Parent/Guardian	
Print Name			Parent/Guardian	