

Permission Slip Chinatown

Please return ASAP

**or e-mail your intentions to attend
to Diane Carioscio or Donna White**

I hereby give permission for my son, _____ to attend the Troop trip to the Oriental Institute Museum located at 1155 east 58th Street and Evergreen Restaurant 2411 S. Wentworth Ave. in China Town on March 3rd. Cost will be \$15.00. Transportation will be provided by the Grace Lutheran School Bus and paid for by the Troop. Well will meet at Grace at 9am and depart no later than 9:15. Our first stop will be the Oriental Museum, than lunch at 12, followed by a Chinatown tour at 1 pm. We will return around 3 pm. at Grace.

Adult Signature

Date

In case of emergency, I understand every effort will be made to contact me (if participant is an adult, my spouse or next of kin). In the event I cannot be reached, I hereby give my permission to the licensed health-care practitioner selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my child (or for me, if participant is an adult).

Date _____ Signature of parent/guardian/adult _____

Emergency Contact # _____

Emergency Contact _____