



# PARENT PERMISSION FORM

*Form must be completed in order for your  
child to attend club!*

I give permission for: \_\_\_\_\_

*(Child's first and last name)*

to attend Beach Club™ at Crestview Elementary School.

Child's Grade: \_\_\_\_\_ Age: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ ☐ Male ☐ Female

Homeroom Teacher: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

Parent(s) Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Apt. # \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

*Please list phone numbers where YOU can be reached during club time!*

Email: \_\_\_\_\_

Medical Needs: \_\_\_\_\_

Food Allergies: \_\_\_\_\_

Would you be willing to volunteer in your child's club? ☐ Yes ☐ No

Do you attend church: ☐ Yes ☐ No

Where? \_\_\_\_\_

Please let us know who will pick up your child up by 4:30 p.m.:

\_\_\_\_\_  
Phone: \_\_\_\_\_

\_\_\_\_\_  
Phone: \_\_\_\_\_

Please know from time to time we take pictures at Beach Club™.

May we have your permission to photograph your child? ☐ Yes ☐ No

*This is to allow you, your child and others to see the fun kids have during  
Beach Club™... thank you!*