



# ST. ANN

CATHOLIC CHURCH

CELEBRATING 150 YEARS  
*Established 1869 #StAnn150*

## Youth Program Permission Form (2020-2021)

Mother's Name (Printed): \_\_\_\_\_

Father's Name (Printed): \_\_\_\_\_

Children (Please list all children participating):

| Name: | Age: | Grade: | School: |
|-------|------|--------|---------|
|       |      |        |         |
|       |      |        |         |
|       |      |        |         |
|       |      |        |         |

I, \_\_\_\_\_, the undersigned, hereby give permission for  
(Printed Name)  
my child(ren) listed above to participate in St. Ann Catholic Church's Youth Program for the academic year 2020-2021.

I understand that this Program includes both online and in-person events.

I give my permission for their presence at Program and for photos to be taken (no identifying information will be shared) with this signed form and will not hold St. Ann Catholic Church legally responsible in the case of injury or harm.

Parent Signature: \_\_\_\_\_

If I do not yet have your Address, Email or Phone Number, please list that here:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_