After Hours Movie: A Quiet Place One Information Sheet

(Keep this form for your records.)

After Hours Movie: A Quiet Place program will be held after hours, which means the library will be closed and no one other than the teens, patrons attending the I Feel Pretty adult movie, and library staff will be allowed in the building. This program will take place on Friday, October 26 from 7:15 pm to 9:00 pm. All teens must be in the building by 7:30 pm to participate. Please be sure your teen has a ride home promptly following this event. Please make sure that you are available to be contacted using the phone number(s) you have provided during the event.

If there is an emergency, please call 978-640-4490 x279. No other phone will be answered during this time so it is important you dial this number directly.

At the After Hours Movie: A Quiet Place program, teens will be watching the movie A Quiet Place. This thriller/horror movie is Rated PG-13 and may not be appropriate for all teens. For more information on this movie, please look it up on IMDB.com. Specific content information can be found by clicking the "see all certification" link or the "view content advisories" link.

<u>Please register your child online, complete and sign a permission slip, and have your child bring it as their ticket into the program.</u> This paper is for your information only and does not need to be turned in with the permission slip.

If you have any questions, please let me know!

Aimee Villet
Teen Librarian
Tewksbury Public Library
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closed and watching a movie that is Rated PG-13.

After Hours Movie: A Quiet Place Release Form

Tewksbury Public Library 300 Chandler Street Tewksbury, MA 01876

I give permission for my child/children to participate in the After Hours Movie: A Quiet Place
event at the Tewksbury Public Library on Friday, October 26 from 7:15 pm to 9:00 pm.
I understand that, during this program, they will be attending an event while the building is

I understand that all teens must arrive by 7:30 pm with a permission slip signed by a legal guardian.

I have read and understand the information on the "After Hours Movie: A Quiet Place Information Sheet" attached to this form.

Signature of Parent/Guardian:	
Phone:	Date:
Alt. Phone:	
Names and ages of minors:	
Name	Age
Name of staff member:	