

**PERMISSION SLIP**  
LifeSpring Christian Church  
174 N. Star Rd. Star, ID 83669  
208-629-2001  
Chris' cell (812) 797-6473

Name \_\_\_\_\_ Age \_\_\_\_\_ Birth date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

School \_\_\_\_\_ Grade **in** or **completed** \_\_\_\_\_

Parent( s) business phone \_\_\_\_\_

To whom it may concern:

The undersigned does here by give permission for (my) child,

\_\_\_\_\_ to attend and participate in activities sponsored

by LifeSpring Christian Church on \_\_\_\_\_.

Emergency phone number \_\_\_\_\_

\_\_\_\_\_  
Participant \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Parent Signature \_\_\_\_\_ Date \_\_\_\_\_