



## Parent/Guardian Permission Form

### SAVE Promise Club

Please return this permission form to

\_\_\_\_\_ (Adult Advisor's Name) by  
 \_\_\_\_\_ (Date).

I give permission for my child \_\_\_\_\_ to  
 participate in the SAVE Promise Club at \_\_\_\_\_ School.

I understand that my child will participate in both the student-led SAVE Promise Club in-school  
 and afterschool activities and events to help lead the change in creating safe schools and  
 communities by preventing violence *BEFORE* it happens.

Today's Date: \_\_\_\_\_

Parent  
 Name: \_\_\_\_\_

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

#### Parent contact info

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

E-mail Address: \_\_\_\_\_

Other important information the SAVE Club Advisor should know about your child:

\_\_\_\_\_

**SAVE PROMISE CLUBS**

**Educate**

**Empower**

**Encourage**

**Engage**