



PERMISSION SLIP

I give permission for my child _____
(name)

To participate in ***Beach Bingo*** **Monday, July 22 6-7:30pm**

In case of emergency,

I can be reached: _____, _____
(Cell phone #) (Home #)

Emergency contact person if I cannot be reached _____
(Name)

(Phone #)

Name of person dropping off and picking up my child:

Parent/Guardian's Signature

Additional Notes:

- Held at Founders Landing Park: 1025 Terry Lane, Southold NY
- Drop off and pick up are at the park
- Bring a beach towel and your own snacks and water