

Permission to Contact Youth

Complete One Form per Child

Child's Name:
Date of Birth:
Our parish and/or school,
Please indicate below whether our parish has permission to contact your child:
I hereby grant permission for the following parish and/or school,
Signature of Parent or Legal Guardian Date
Print Name of Parent or Legal Guardian Please contact your Parish Catechetical Leader/School Administration immediately to change these permissions.
FOR OFFICE USE ONLY: This form is to be kept for current year. Supplant annually until the child is 18. 2401 Lake Park Drive, S.E. • Smyrna, Georgia 30080-8862