## PARENT'S PERMIT

## ACA - OSA - SAO - 04F



## Office of Student Formation and Activities University of San Carlos Cebu City

<u>01/18/2023</u> (Date)

Dear <u>Ms. Blasminda Mayol and Mr. Ean Velayo</u> (Faculty – Adviser)

We, the parents/ guardians of <u>Christian Stewart</u> allow our child to join the <u>DCISM</u> <u>Acquaintance Party 2023</u> on <u>February 3, 2023, 4:00 pm - 9:00 pm at The Event Space, Mabolo, Cebu City</u>.

We are conscious of the risk and benefits involved in this activity and thus our child, after having obtained our permission, has the responsibility of safeguarding himself. We understand that the University of San Carlos and the Office of Student Formation and Activities will not be accountable for any untoward incident that may happen to him/her.

Sincerelly yours,

John**(S**tewart

Name & Signature of Parent/Guardian