ICL - NAQ Sunday School

5099 West Dobbins Road Laveen, AZ 85339 602-237-2666

Parents/Guardian Permission Slip

	I,, (I	Parent/Guardian) gives permission for my	
	child,, t		
	or sandwiches), popcorn, ice cream, cookies, and/or candies		
	ı,, (ı	Parent/Guardian) do not wish to have my	
	child,, t		
	or sandwiches), popcorn, ice cream, cookies, and/or candies		
Allergies Awareness			
	 My child has food allergies. (List allergies below) 		
	 My child does not have food allergies. 		
Use of Technology & Permission to Take Pictures			
	I authorize ICL – NAQ Sunday School to have my child use the	e technology items for education purposes	
	only. I also give permission to take picture(s) of my child duri	ing special events and/or specific ocassions	
	I do not wish my child to use the technology items provided by ICL – NAQ Sunday School. I also do not		
	wish to have pictures taken of my child during special events	and/or specific ocassions.	
	nature (Parent/Guardian) Name (Last First, M.I.)	Dhara	
3	nature (Parent/Guardian) Name (Last Pirst, W.T.)	Phone Date	
Official Use Only			
Si	nature (ICL Educational Services) Name (Last First, M.I.)		