

**Sevier County Public Library System
Teen Program Permission Slip**

I understand that my child will be attending teen programs at the Sevier County Public Library System. I further understand that part of the programs will include movies, based on books or chosen book themes, and that these movies may be rated above PG. Occasionally we will also have field trip activities leaving and returning to the library by school bus. By my signing, I agree for my child to participate in these programs and view the materials chosen by the library staff. I understand that I will have advance knowledge of the movie my child will see, and the rating, and may choose not to have my child participate.

- *The upcoming teen program will be held on _____(date)
- *The library will be showing the movie _____, which is rated _____
- *We will not be leaving the library OR We will be leaving the library: (circle one)
for the following activity _____
- *We will travel by school bus to _____
- *The program will start at _____ and end at _____(time), please be prompt in picking your children up at the library.

By my signature below I give permission for my child _____ to participate in the program outlined above, see the movie, and/or ride the bus to attend associated activities, and state that I have read and agree to the plan. Photos and/or videos may be made for publicity purposes and I agree for my child's image to be used.

Name of Parent (print) _____
Parent Signature _____
Emergency Contact Number _____
Childs Name _____

*All permission slips and registration for programs must be completed and turned in one week before the program to guarantee your child's space. Questions? Call 453-3532 and ask for Lisa Yarber or Circe Anderson.

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