

Evangelical Formosan Church, Los Angeles

Parent Consent Form

Destination	CA Science Center, LA, 700 Exposition Park Dr, Los Angeles, CA 90037
Date of Service	8 / 27 / 2017, Sunday
Time of Departure	9: 00 AM
Time of Return	12: 00 --12: 30 PM (back to church)
Meeting Place	EFCLA, CM Check In/Out Area
Contact Name	Ruth Kuo
Contact Number	626- 759-2537

_____ give my child _____

(Parent / Guardian's name)

(Child's name)

Permission to do any necessary routine, transport or emergency medical treatment during the aforementioned trip to Evangelical Formosan Church, Los Angeles, on the date of August 27, 2017

Emergency contact

1. Name: _____

Cell Phone: _____

2. Name: _____

Cell Phone: _____

Parent / Guardian's Signature _____, Date _____