



PERMISSION SLIP

I give permission for my child _____
(name)

To participate in **Noticing Nature on Friday, August 6 11am-12noon**

In case of emergency,

I can be reached: _____,
(Cell phone #) (Home #)

Emergency contact person if I cannot be reached _____
(Name)

(Phone #)

Who will be dropping off and picking up?

Parent/Guardian's Signature _____

Additional Notes:

- **Drop off child at the Arshamomaque Preserve on Chapel Lane in Greenport by 11am**
- **Please wear comfortable clothes for walking, bring a water bottle, and wear or bring bug repellent and sun screen.**
- **Pick up child by 12noon**