

LUTHERAN CHURCH OF THE RESURRECTION

1700 Makefield Road

Yardley, PA 19067

215-493-2018

YOUTH MINISTRY PERMISSION SLIP

I give my permission for my children to attend the following LCR sponsored event.

Name of event: _____

Location of event: _____

Date of event: _____

Time of event: _____

Child's name: _____

Child's name: _____

Child's name: _____

Signature of parent/guardian: _____

Cell Phone # _____