

Permission Slip

_____ has my permission to participate in the Henna/Mehndi program
(Name of Participant)

(a program that involves a temporary dyeing of the skin with natural herbs that lasts approximately 1 week to 1 month)
at Watertown Public Library on Friday October 24th at 6:00pm.

(Signature of Parent/Guardian)

(Relationship to participant)

(Emergency Contact Phone Number)

(Age of participant)

Questions or comments? Please contact Amanda at the Watertown Public Library at (920) 262-4090. Please turn in by
October 20th.

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