## Permission Form

I, \_\_\_\_\_\_\_to participate \_\_\_\_\_\_to participate \_\_\_\_\_\_to participate in "Changing the Future...A conversation about teen pregnancy and access to healthcare services" to take place on May 1<sup>st</sup> from 1-3 pm at 3601 C. Street 3<sup>rd</sup> Floor (Frontier Building). This conversation is sponsored by the State of Alaska Adolescent Health Program. If I have any questions, I can contact Ashley Rousson at 907-770-9716 or <u>Ashley.rousson@ppgnw.org</u>.

\_\_\_\_\_Signature of Parent/Guardian

Date