

# Time Away Slip

CHURCH USE ONLY

HOME: \_\_\_\_\_

Estimated Date/Time of Return: \_\_\_\_\_

Time of Confirmation: \_\_\_\_\_ Confirmed by: \_\_\_\_\_

I, \_\_\_\_\_, give my permission for my child,  
\_\_\_\_\_, to leave

- Mode of transportation (circle one):

Drive own vehicle

Parent Pick Up

Other: \_\_\_\_\_

- If being picked up, by whom? \_\_\_\_\_

Student will leave at \_\_\_\_\_ on \_\_\_\_\_ and return at \_\_\_\_\_ on \_\_\_\_\_

Student will leave at \_\_\_\_\_ on \_\_\_\_\_ and return at \_\_\_\_\_ on \_\_\_\_\_

Student will leave at \_\_\_\_\_ on \_\_\_\_\_ and return at \_\_\_\_\_ on \_\_\_\_\_

- Reason for leaving \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Youth Pastor's Signature \_\_\_\_\_

## CONTACT INFORMATION

Parent's Home # \_\_\_\_\_

Parent's Cell # \_\_\_\_\_

Student's Cell # \_\_\_\_\_