

PERMISSION SLIPS FOR MINORS
(Directors to distribute this at initial read through)

Name of show: _____

Name of child(ren): _____

Name of parent/guardian: _____

Contact information for parent/guardian:

Cell phone: _____

Email: _____

Cast party(ies)*:

____ Yes, my child(ren) have permission to attend

____ No, my child(ren) do not have permission to attend

____ Yes, I (parent or guardian) plan to attend cast party

____ No, I (parent or guardian) do not plan to attend cast party

Name of person driving child(ren) to cast party: _____

Name of person driving child(ren) home from cast

party: _____ *Please note that cast parties may include alcohol that is available to adult attendees. Parents/guardians are responsible for ensuring that their children understand that they are not allowed to drink alcohol at a cast party.