## **South Sound Elementary Choir Festival**

Sponsored by PLU Music Ed. Dept. in partnership with Tacoma Youth Chorus

## PERMISSION TO PARTICIPATE

Saturday, February 10, 2018 // 12:30 pm to 4:30 pm Lagerquist Hall, Pacific Lutheran University 12180 Park Avenue South, Tacoma, WA 98447

Student Name	Nickname		
Best Phone	Current grade in school	Age	☐ Male ☐ Female
School Name	Music Teacher's Name		
Address	City		WA Zip
Parent/Guardian Name(s)		Cell Phone	
Email Address			
Describe your child's musical experiences	and interests:		
Name of person to call in case of emerge	ncy when the parent/guardian is	not available:	
Emergency Contact	Ce	l Phone	
Relation to singer	Sec	condary Phone	
Family Doctor	P	hone	
Please describe any health concerns inclu	uding allergies to particular medic	cations or food:	
Authorization			
I give my permission to a representa	tive of Tacoma Youth Chorus to see	k medical attention	for my child (named above).
Parent/Guardian Signature		Da	te

Please contact your school music teacher with any questions.