



Idente Youth WANTS YOU!!!



Join Idente Youth **TEENS** (High School)
every Friday from 7:10-8:45pm
or Idente Youth **TWEENS** (6th to 8th grade)
every Friday from 4:00-5:30pm
WHERE: Santa Maria Parish Hall
(2352 St. Raymonds Ave, Bronx, NY 10462)
The meetings include games, talks, and much more
For more info call Yerania or Marek @ 347-948-3122
or visit www.identeyouth.us



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PARENTAL PERMISSION FORM

I hereby give my son/daughter permission to take part in the weekly meeting of Idente Youth at Santa Maria Parish Hall located at 2352 St. Raymonds Ave, Bronx, NY 10462 on Fridays from 4:00pm - 5:30pm (Tweens) or 7:10pm-8:45pm (Teens). If there is any change in time or location of meetings I will be duly notified. The meetings are conducted under the guidance of Idente Missionaries in collaboration with Idente Youth and Santa Maria Parish. I understand that the meetings will have adult supervision, and reasonable and appropriate measures will be made to minimize risk or injury. I understand that I have to pick up my child **PROMPTLY** at the end of the meeting unless I authorize them to return home on their own. In case of an emergency, he/she may be treated by a doctor. Should medical attention be required for my child, I will pay the expenses incurred. In case of accident, injury or loss, my family and I will not hold Santa Maria Parish, Idente Missionaries, Idente Youth, or any affiliate/agent liable. I consent that any pictures/video taken of my child in connection with the event can be used for publicity, promotion, or television showing now or in the future, and I waive compensation in regard thereto.

Child's Name Date of Birth

Parent/Guardian's Name Home Telephone Number Parent's Cell Phone Number

Parent/Guardian's Signature Date

Address City, State, Zip Code

Emergency Contact (other than parent/guardian or sibling)

My child can return home on their own. Signature _____ Date _____

My child will be picked up by: _____
(Enter more than one Name Relationship to the child
person if needed)

Name Relationship to the child

Parent's E-mail Child's E-mail