



PARENT/GUARDIAN PERMISSION FORM

NAME OF EVENT..... Ironbirds game
WHO WILL BE ATTENDING..... Girl Scouts of Central Maryland Chorus
DATE..... Saturday, July 25, 2015
LOCATION..... Ripken Stadium in Aberdeen
ARRIVE..... 6:10 PM
STOP TIME.. 7:10 PM we'll be done singing, but stay for the game!
MEETING PLACE..... Stadium: Take 95 north to Aberdeen – follow the signs or
Check the website: www.ironbirdsbaseball.com
COST..... \$15/person – bring money to end of year ceremony or
mail to Kelly Smith, 209 Kenwood Ave.,
Catonsville, MD 21228
Tickets will be at Will Call in the name of Girl Scout Chorus
METHOD OF TRAVEL..... Parents' cars
WHAT TO WEAR..... Chorus shirts, black skirt or slacks
ADULT IN CHARGE..... Heidi Roman
FIRST AIDER..... Pat Disharoon
ADULT CERTIFIED FOR TROOP CAMPING (if required): Pat Disharoon
EMERGENCY CONTACT: Russ Disharoon PHONE: 410-233-5337
**Troops/groups traveling to and from Girl Scout events must adhere to the driving/seatbelt/First Aid standards and
checklists in SAFETY-WISE.

PLEASE KEEP TOP HALF FOR YOUR RECORDS

RETURN BOTTOM HALF OF FORM TO DIRECTOR to June 8 performance

My daughter _____ has my permission to participate in the field trip to Aberdeen Ironbirds.

I agree that my daughter is in good health and may participate in this activity. I give my permission for medical treatment if necessary. I understand that Girl Scout activity insurance is secondary to any personal insurance I may have. I agree that she will not attend this event if she should become ill or exposed to a contagious disease. I also give my permission for her to be photographed for publicity purposes.

____ I, _____, will also be performing with my daughter.

____ Total # of tickets – check or cash enclosed.

During the event I can be reached at:

Location _____
Phone Number _____ D _____ E
Cellular Phone _____ Pager number _____

If I cannot be reached in an emergency, please contact (print information):

Name _____ Relationship to child _____
Phone Number _____ D _____ E
Cellular Phone _____ Pager number _____

Parent _____ (print name)

Parent _____ (signature) Date _____