

Stuffed Animal Sleepover Lock-in at Memorial Hall Library  
Teens entering 6<sup>th</sup>-12<sup>th</sup> Grades  
Friday, December 15<sup>th</sup> 2023  
5pm-8pm

**Parental Permission Slip**

**Teens must also register online at :**

**TO BE FILLED IN BY THE TEEN PARTICIPANT (Teens entering 6-12 only)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Age: \_\_\_\_\_ School: \_\_\_\_\_

Grade: \_\_\_\_\_

I agree to abide by all the rules of the library and to follow the directions of the chaperones. I understand that if I do not, my parent or guardian will be called and I will have to leave the Lock-In.

Signature of Teen Participant: \_\_\_\_\_

Date: \_\_\_\_\_

**TO BE FILLED IN BY THE PARENT/GUARDIAN OF THE TEEN PARTICIPANT**

I, \_\_\_\_\_, give permission for my teen, \_\_\_\_\_, to attend the Library Lock-In. I understand that this event is supervised and that the rules of the library will be enforced by the chaperones. I also understand that my child may be allowed to use the library computers.

I hereby release Memorial Hall Library from any liability for any claim or damage which may result during the event.

**During the time of the Lock-In, I may be reached at the following number:**

\_\_\_\_\_

**Should the library be unable to contact me, an alternative contact is:**

**Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**(Please fill out both sides)**

A meal will be provided at the lock-in. Please describe any special needs and/or allergies your child may have:

**I agree to pick up my child at Memorial Hall Library's parking lot entrance at 8pm on Friday, December 15th.**

**Signature of parent/guardian:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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