Eight Great Tuesdays Responsible Adult Form

I __________________________ the parent/guardian of the child/children listed below am giving my permission for ______________________________ to be the responsible adult for the following children while attending this event.

Parent Signature ________________________________________

Child’s Name          Age

1. ______________________________   _____
2. ______________________________   _____
3. ______________________________   _____

I __________________________ have agreed to accept full responsibility of the above child/children while attending Eight Great Tuesdays on the following date ____________ and return them to their parent/guardian there after.

Signature ________________________________________