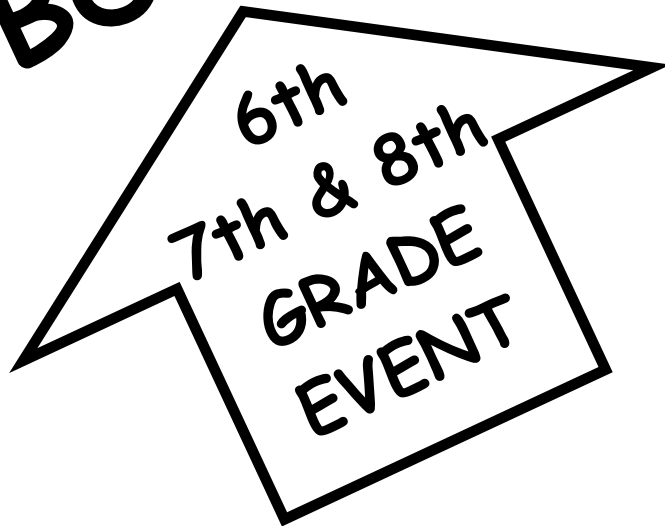




COSMIC BOWLING



- * Friday, February 24
7:00 p.m. - 9:30 p.m.
- * Meet at the church
- * Cost: \$12.00
includes bowling,
bowling shoes & pizza
- * Bring money for drinks
- * Parent sponsors needed!!

**FRIENDS
WELCOME!!**

PERMISSION FORM - 6th, 7th and 8th GRADE EVENT

NAME _____ has my permission to attend the 6th, 7th and 8th Grade Cosmic Bowling Event at Sempeck Lanes on Friday, February 24. I hereby authorize treatment by a licensed medical doctor for the above named minor in the event of an emergency.

Date _____ Parent Signature _____

Phone (home) _____ (cell) _____ (email) _____

Family Physician _____ Phone _____

Allergies or Medications: _____

I volunteer to be a parent sponsor _____

Rejoice! friend who invited me _____