

## Permission Form for After-Hours Mystery Night at the Library

My child/children: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ has/have permission to attend the Mystery Night at the Grandview Heights Public Library from 7:00 p.m.-9:00 p.m. Friday, January 25, 2019.

If photographs are taken for publicity purposes, (please check one)

- ☐ the Library has my permission to use photographs of my children
- ☐ the Library does NOT have permission to use photographs of my children

By signing this permission form, I grant the Grandview Heights Public Library permission to call for emergency assistance and for the medics to transport my child to the nearest hospital in case of medical emergency.

Parent's Name (please print) \_\_\_\_\_

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

Phone number: (cell) \_\_\_\_\_ (alternate) \_\_\_\_\_

Phone number where I can be reached during this activity (Friday, January 25, 2019, 7:00 p.m.-9:00 p.m.) or where other parent/guardian can be reached (if different from above)

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

My child will leave the Lock-In by (circle one or more options):

*Walking home*

*them up*

*I (signer) will pick*

*Going home with an adult other than myself*

(Name: \_\_\_\_\_ Phone: \_\_\_\_\_)

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If you have any questions, please contact:

Jennifer Lawson, Teen Librarian

Grandview Heights Public Library, 1685 W. First Avenue (486-2951)

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**IMPORTANT:**

**The library phones are turned off after hours.** If you have an emergency and need to contact your child while they are at the lock-in, please call the following cell phone number and a staff member will assist you.  
**614-507-7744**