

**Parent Permission Slip - Student Vaccine Clinic
Friday April 30th and Friday May 21st
Peebles in Meadville, PA**

With my signature, I hereby grant my permission for my child to attend the:
Student Vaccine Clinic at Peebles in Meadville, PA on April 30th and May 21st. The bus will leave the school at approximately 9:00 am and return at approximately 11:30 am, with Transportation to be provided. This trip will be chaperoned by faculty/administration.

If you have questions please contact Dr. Tomcho at 814-438-7673 or by email at mtomcho@ucasd.org

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Student Name: _____ Grade: _____

Parent Printed Name: _____ Parent Contact #: _____

Parent Permission Signature: _____

Secondary Contact Name: _____ Contact Phone #: _____

*Parent Permission Slips must be returned to the MS/HS office no later than Wednesday, April 28, 2021.