



2019 PERMISSION SLIP COLLIER COUNTY STUDENTS



Fax forms to 239-252-0145 or take picture of the form and email to: grunde@collierschools.com

Youth Relations Bureau: Office # 239-252-0144

The DEPUTY Club program is **FREE** and open to registered **Collier County** students from Naples, Immokalee and Everglades. They must be going into **1st grade up to 5th grade**. Space is limited to the **first 100 applicants**. **First time** attendees will be given first consideration. It will be held June 3-7th, 2019 at **Oakridge Middle School** located at **14975 Collier Blvd, Naples**. We will also have free fingerprinting (Child ID) if your child hasn't had this done before. If interested, please complete free fingerprinting form. **FREE** lunch also provided (water, beverage). You will be contacted by one of the Deputy Club coordinators once your permission slip is received.

More information can be found on the website www.colliersheriff.org – Kids Zone.

I give my child _____ permission to participate in the DEPUTY Club

(PRINT FIRST LAST NAME)

Program hosted by the Collier County Sheriff's Office.

I also understand that my child may be photographed and that those photographs may be used for publicity purposes at the discretion of the Collier County Sheriff's Office.

I also release the Sheriff and any of his agents or employees from any liability and waive any claims for damages they have or may have that result from participation in these field trips.

PRINT INFORMATION

SCHOOL NAME OF PROMOTED TO
STUDENT ID #: _____ SCHOOL: _____ GRADE: _____

SHIRT SIZE

AGE: _____ HEIGHT: _____ FT _____ IN. YOUTH or ADULT: _____ SWIM: YES - NO - ALITTLE

ALLERGIES / MEDICAL CONCERNS: _____

HOME ADDRESS: _____ ZIP: _____

MOTHER'S NAME: _____ CELL PHONE : (_____) _____

FATHER'S NAME: _____ CELL PHONE : (_____) _____

HOME PHONE: (_____) _____ E-MAIL ADDRESS: _____

AUTHORIZED INDIVIDUALS TO PICK-UP: (PLEASE PRINT)

PHONE: (_____) _____

PHONE: (_____) _____

PHONE: (_____) _____

PHONE: (_____) _____

PARENT / GUARDIAN SIGNATURE: _____ DATE: _____