

# Permission Slip & Emergency Contact Form

## (for attendees under age 18-please bring to event)

“Yearbook Jumpstart” yearbook workshop, Sept. 23, 2026  
at Southern Connecticut State University, Adanti Student Center  
501 Crescent Street New Haven, CT

I \_\_\_\_\_ give permission for  
Parent or Guardian Name  
\_\_\_\_\_ to attend the Yearbook Jumpstart workshop  
Student Name  
at Southern Connecticut State University on September 23, 2026.

In the event of an emergency, please contact:

Name: \_\_\_\_\_

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

I certify that I am the parent or guardian of the student named above. I agree to his/her participation in the Yearbook Jumpstart workshop event, believing that every precaution will be taken to ensure the safety of my son/daughter during this event.

As parent and/or legal guardian, I remain legally responsible for any actions taken by the above named student/child. I agree on behalf of myself, my child/student named herein, or our heirs, successors and assigns, to hold harmless the officers or other representatives associated with the event, from any and all actions, claims, demands, damages, costs, expenses and consequences arising from or in connection with my child/student attending the event or in connection with any illness or injury or cost of medical treatment in connection therewith, and I agree to compensate the organizer or event representatives associated with the event for reasonable fees and expenses arising therewith.

Parent/Guardian signature \_\_\_\_\_

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

**\*PLEASE HAVE STUDENTS UNDER 18 BRING THIS FORM TO THE WORKSHOP.**