

Lillie M. Evans Library

Lock-in Permission Slip

I grant my permission for _____ to participate in the High School Lock-in beginning **Friday, November 13 at 10:00 PM** and ending **Saturday, November 14 at 6:00 AM** at the Lillie M. Evans Library, 207 N. Walnut, Princeville, IL. Teens must be attending high school (9th-12th grade) during the 2015-2016 school year.

Permission forms must be turned in by Wednesday, November 11 at 8:00 PM. No permission forms will be accepted after that date or the night of the lock-in.

By signing this permission form, I understand the following:

- My teen must arrive between 9:45 PM and 10:15 PM. At 10:15 PM the doors will be locked and late arrivals will not be permitted inside.
- I will be called if my teen does not arrive at the event before 10:15 PM.
- I must provide a contact number where I can be reached during the lock-in in case of emergency.
- My teen will not be permitted to act in a manner deemed unacceptable by the library staff or chaperones. I will be called if there is any unacceptable behavior regardless of the time.
- My signature below also gives permission for my teen to watch PG/PG-13 movies during the lock-in.
- My signature below also gives the library permission to take photos and record videos of my teen during the event and use them to promote the library, its programming, and services.

My teen will get home by: Walking Driving Parent

Riding with: _____ Phone: _____

Parent/Guardian Signature: _____ **Date:** _____

Parent Cell: _____ **Parent Alt Phone:** _____

MEDICAL RELEASE INFORMATION

Name: _____

Address: _____

Contact: _____

Main Phone Number

Alt Phone Number

In the event of an emergency where medical attention is required, I hereby grant permission to the library staff to obtain services from a licensed physician.

Parent/Guardian Signature: _____ **Date:** _____