



18 U.S.C. 707

# University of Vermont Extension 4-H Parental Permission Statement Form CE-8



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**Top half to be completed by 4-H leaders or staff:**

The \_\_\_\_\_ 4-H group is planning a trip  
to \_\_\_\_\_  
from \_\_\_\_\_ at \_\_\_\_\_ to \_\_\_\_\_ at \_\_\_\_\_  
Date Time Date Time

The purpose of this trip is:  
\_\_\_\_\_  
\_\_\_\_\_

Suggested items to bring:  
\_\_\_\_\_  
(Please note that UVM is not responsible for damages or theft of personal property.)

Leaders responsible for the group(s) are \_\_\_\_\_,  
\_\_\_\_\_, \_\_\_\_\_.

\*\*\*\*\*  
(Please Detach and Return Lower Half)

I give permission for \_\_\_\_\_ Age \_\_\_\_\_  
Last First Middle Initial

Address \_\_\_\_\_  
to participate in the \_\_\_\_\_ trip  
from \_\_\_\_\_ at \_\_\_\_\_ to \_\_\_\_\_ at \_\_\_\_\_  
Date Time Date Time

To the best of my knowledge, my child is in good health and can participate in this activity. I have indicated below any reasonable accommodations needed to meet my son/daughters mobility, vision, hearing or other needs. I have attached form CE-9 to alert you to any health problems or medical conditions that may interfere with his/her participation.

\_\_\_\_\_  
Parent/Guardian Signature Date

Please tell us of any accommodations your son or daughter may require (hearing, vision, mobility, other...)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_