



HOLY TRINITY CATHOLIC CHURCH
MONT BELVIEU, TEXAS
YOUTH GUEST PERMISSION SLIP

EVENT NAME: _____

DATE OF EVENT: _____

BEGINNING TIME: _____ ENDING TIME: _____

I, _____ (PARENT'S NAME), GIVE PERMISSION FOR MY CHILD,

_____ (CHILD'S NAME) TO VISIT AND

PARTICIPATE AT HOLY TRINITY CATHOLIC CHURCH ON _____ (DATE) WITH

_____ (PARISHONER'S NAME).

DURING THE EVENT, I CAN BE REACHED AT _____ (PHONE NUMBER).

IN THE EVENT THAT YOU ARE UNABLE TO CONTACT ME, PLEASE CONTACT:

EMERGENCY CONTACT NAME: _____

EMERGENCY CONTACT PHONE#: _____

VIDEO/PHOTOGRAPHY CONSENT: As a parent/guardian, I understand that photos and/or video (individual or group) may be taken during CCE and/or TYM/SHINE group activities. I give consent to allow my child's/children's image to be recorded, either by photograph or video, and used for promotional materials (social media, newsletters, web page, calendars, PowerPoint, video, etc.) to highlight Holy Trinity Catholic Church. Yes _____ No _____

PARENT NAME (PRINTED)

DATE

PARENT SIGNATURE

Completed Permission Slip is required for all Youth Guests & HTCC Minor Parishioners not enrolled in Holy Trinity Catechetical Programs. Completed form must be turned in prior to event to Youth Minister/Catechist must be filed with Parish Catechetical Office after event.

Effective Feb. 1, 2022