

# Library Tour Authorization Form

For Elementary Students

Please complete this form to grant permission for your child to participate in the upcoming library tour.

## Student Information

Student Name

Grade

Teacher's Name

Date of Tour

## Parent/Guardian Information

Parent/Guardian Name

Contact Number

## Emergency Information

Emergency Contact Name

Emergency Contact Phone

Medical Conditions / Allergies (if any)

## Authorization

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I give permission for my child to participate in the library tour organized by the school.

Parent/Guardian Signature

Date