

Declamation Permission/Consent Form

I, _____, would like to enter the local declamation competition on Tuesday, March 12, 2019 at St. Vincent de Paul School. I agree to attend weekly practices with Declamation coaches at St. Vincent de Paul School.

Student Signature

Parent Signature

PLEASE PRINT LEGIBLY OR TYPE name, email, and parent's phone number

Participant's Name _____

Parent's Email _____

Parent's Phone _____

The \$10.00 participation fee will be billed in FACTS system (can be paid online if desired). Please return permission form to the school office by Tues. Jan. 15th.

Form is required to choose a script.