

I give my child

2018 PERMISSION SLIP COLLIER COUNTY STUDENTS



permission to participate in the DEPUTY Club

Fax forms to 239-252-0145 or take picture of the form and email to: 1842@colliersheriff.org

Youth Relations Bureau: Office # 239-252-0144

The DEPUTY Club program is **FREE** and open to registered **Collier County** students from Naples, Immokalee and Everglades. They must be going into **1**st **grade up to 5**th **grade**. Space is limited to the **first 100 applicants**. **First time** attendees will be given first consideration. It will be held June 4-8th, 2018 at **Oakridge Middle School** located at **14975 Collier Blvd, Naples**. We will also have free fingerprinting (Child ID) if your child hasn't had this done before. If interested, please complete free fingerprinting form. **FREE** lunch also provided (water, beverage). You will be contacted by one of the Deputy Club coordinators once your permission slip is received.

More information can be found on the website www.colliersheriff.org – Kids Zone.

Program hosted by the	FIRST Collier County S	LAST NAME) heriff's Office.			
I also understand that purposes at the discret	•	~ .		aphs may be used for publicity	
I also release the Sheri damages they have or	•			and waive any claims for ips.	
	Р	RINT INFORMA	TION		
CHOOL NAME OF		ME OF		PROMOTED TO	
STUDENT ID #:	SCHOOL:			GRADE:	
AGE:HEIGHT:_	FT	SHIRT SIZE _IN. YOUTH or ADULT	·:	SWIM: <u>YES - NO - ALITTLE</u>	
ALLERGIES / MEDICAL (CONCERNS:				
HOME ADDRESS:				ZIP:	
MOTHER'S NAME:			CELL PHONE :()		
FATHER'S NAME:_		CE	LL PHONE: ()	
HOME PHONE: ()	E-MAIL ADDRE	SS:		
A	UTHORIZED	INDIVIDUALS TO	•	•	
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PARENT / GUARDIAN SIGNATURE:				DATE:	