

Parental/Guardian Permission Form

Please hand in person or email this form to DFLTeens@gmail.com within 48 hours of submitting the application.

I understand that my child is applying to participate in **Dux Teens Fly High**. I have read and understand the library's expectations should their application be accepted.

Parent/Guardian Signature: (one adult signature per application is sufficient)

Date

Teen Signature(s)

Date

Printed Teen Name(s)

Program/Project/Exhibit Name

