

**Sunset Hills UP Church**  
**PARENTS' NIGHT OUT**

**Saturday, December 14<sup>th</sup>**

**5 pm – 8 pm**

**Big Room**

Child(ren)'s Names: \_\_\_\_\_

Age(s): \_\_\_\_\_ Address: \_\_\_\_\_

Allergies: \_\_\_\_\_

Name of Guardian(s): \_\_\_\_\_

Emergency Contact Number: \_\_\_\_\_

Who Has Permission to Pick Up Children Following Event?

Photo ID matching below name will be required at pick-up.

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May we use photos of your child(ren) from this event for publicity purposes? \_\_\_\_\_

In case of emergency, may your child receive emergency medical treatment? \_\_\_\_\_