De La Salle

Santiago Zobel School Ayala Alabang Village, Muntinlupa City

PARENTAL CONSENT FORM

(Please accomplish in duplicate)

Objectives of the Activity	tivity :	commu To join a d	nication ebate training	/contest	tiveness is speec	h and oral	
Place(s) of Activity/ie	es :	UP Diliman Campus, Quezon City					
Inclusive Date/s of A	ctivity :	May 18	-20, 2012				Ī
Assembly Time:	6:50 A	6:50 AM Assembly Venue: McDonalds ATC					
Time of Departure:	7:00 A	M	Expected Tir	ne of Arr	ival (DLSZ):	6:00 PM	j
Group/s involved:	Zobel Parliar	nent					<u></u>
Person-in-Charge of t	the Activity	Mr. Leand	ro D. Macasa	aet/Mr. Jo	orge S. Baclor, Jr]
Adult Leaders and co	ntact number	s: (Please aff	ix signature/s	beside na	nme/s)		_
Mr. Leandro D. Ma	casaet 092	15344789					
Mr. Jorge S. Baclor	, Jr. 0920	9689335					
Transportation: DL	SZ VAN]
Fee: Php6	00						
I have read the details (Grade/Year & Sec)		•	y permit my s	son/daugł	iter		
	e teachers/lea	ders thereof t	o ensure his/h	er safety	during the activ	on in this activity and the ity. We are also expected rrival.	
SIGNATURE OF PA	RENT/GUA	RDIAN (as it	appears in the	e school r	ecords/documen	ts):	_
PRINTED NAME OF PARENT/GUARDIAN :							
RELATIONSHIP TO	STUDENT		:				
ADDRESS :							
CONTACT NUMBE		andline (Hom (Officobile number	ee) :				
Comments/Suggestio	ns:						
SIGNATURE VERIE	FIED BY:			D	ATE VERIFIED	:	_