



# MODEL 110<sup>TH</sup> CONGRESS

*sponsored by Congressman Mark Kirk*

## Parental Permission Form

Student's Name: \_\_\_\_\_

Student School: \_\_\_\_\_ Year of Graduation: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

### ***Emergency Information:***

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Relationship: \_\_\_\_\_

***Medical Information*** (please list any medical information we should be aware of):

\_\_\_\_\_  
\_\_\_\_\_

### **Permission**

I hereby give permission to my child to participate in Congressman Mark Kirk's Model Congress on April 21<sup>st</sup> and 22<sup>nd</sup> of 2006.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature

### **Photo Release**

I, \_\_\_\_\_, hereby authorize the Office of Congressman Mark Kirk to photograph and/or videotape my son or daughter at the Model Congress event to be held on April 21<sup>st</sup> and 22<sup>nd</sup> of 2006.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature

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***Please fax the completed form to (847) 940-7143 or send it via mail to:  
707 Skokie Boulevard, Suite 350  
Northbrook, IL 60062***