



# MODEL 111<sup>TH</sup> CONGRESS

sponsored by

CONGRESSMAN MARK KIRK

## Parental Permission Form

Student Name: \_\_\_\_\_

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

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

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

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

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

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

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

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

\_\_\_\_\_

### **Permission**

I hereby give permission to my child to participate in Congressman Mark Kirk's Model Congress on April 18, 2009.

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

Signature

### **Photo Release**

I, \_\_\_\_\_, hereby authorize the Office of Congressman Kirk to photograph my son or daughter at the Model Congress event to be held on April 18, 2009.

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

Signature

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