

PURE MARTIAL ARTS FITNESS ACADEMY
SUMMER ACTIVITIES CAMP w / Karate 2017

TRIP (12) PERMISSION SLIP

(Please fill out separate slips for each Camper)

I am the parent \ guardian of _____ . I grant permission to Pure Martial Arts Fitness Academy to take my child\children on trip (12) to the **Bowtie Cinemas, Trumbull, CT** on July 12, 2017 to see **Storks Find Your Flock**. I do understand that he \ she \ they will be transported by Pure Martial Arts Fitness Academy, Inc. The expected departure time is 9:00 a.m. with an expected return time between 12:00 p.m. for lunch.

Parent\Guardian (print name)

Signature

Date

Tear at perforation and keep this copy for your records.



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TRIP (8) PERMISSION SLIP

(Please fill out separate slips for each Camper)

I grant permission to Pure Martial Arts Fitness Academy to take my child\children on trip (12) to the **Bowtie Cinemas, Trumbull, CT** on July 12, 2017 to see **Storks Find Your Flock**. I do understand that he \ she \ they will be transported by Pure Martial Arts Fitness Academy, Inc. The expected departure time is 9:00 a.m. with an expected return time between 12:00 p.m. for lunch. Important numbers: **PMAFA – 368-0773, PMAFA Student Phone - 367-8287, Master Purefoy – c:727-7421, Ms. Priscilla – c:203-394-7467, Ms. Georgina – c:330-881-0113, U Dan Ja Nim Khyna c:203-278-7443**

