

PURE MARTIAL ARTS FITNESS ACADEMY  
SUMMER ACTIVITIES CAMP w / Karate 2018

TRIP 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 a trip to the **Bowtie Cinemas, Trumbull, CT** on June 26, 2018 to see **Emoji Movie**. I do understand that he \ she \ they will be transported by Pure Martial Arts Fitness Academy, Inc. The expected departure time is 9:10 a.m. with an expected return time is 12:00 p.m. for lunch. Important numbers: **PMAFA – 368-0773-PMAFA, Master Purefoy – c:727-7421, Ms. Priscilla 203-394-7467, , PMAFA Counselor 203-572-7790**

Parent\Guardian (print name) \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

*Tear at perforation and keep this copy for your records.*

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