

Catalyst – Time Away Form

Student's Name: _____

Reason for being gone: _____

I will be gone Day: _____ From: _____ To: _____

I will be picked up by: _____ Or I will drive : _____

I give my permission for my son/daughter to be away from their Catalyst group for the above-mentioned time.

Parent's Signature

Date

****Please turn this form in to your leader or on Friday night. Students will not be allowed to leave for any reason without this form!***