



NJSFWC Local Spelling Bee Contestant Permission Slip

I give permission for my child _____

to participate in the NJSFWC Spelling Bee sponsored by _____

Date: _____ Snow Date: _____

Time: _____

Location: _____

I have reviewed the **Spelling Bee Rules** with my child and I further understand that an adult must accompany my child to this event.

Parent or Guardian Name: _____

Signature: _____ Date: _____

Address: _____ Phone: _____

Cell Phone (in case of snow or other cancellation): _____

Email: _____

PHOTO RELEASE

____ I hereby give the NJSFWC permission to photograph my child during the Spelling Bee event.

____ I do not give the NJSFWC permission to photograph my child during the Spelling Bee event.

The photos will be used for newsletters, membership websites, and newspaper articles submitted to our local communities.

Child's Name: _____

Signature Parent/Guardian: _____ Date: _____