

## OSLC Youth Permission Slip

**Our Savior Lutheran Church  
1910 Black Road  
Joliet, IL 60436**

I grant permission for (Name of Youth) \_\_\_\_\_ to participate in  
Our Savior Lutheran Church's Youth activity (Name) \_\_\_\_\_  
\_\_\_\_\_ on date(s) \_\_\_\_\_.

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

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