Permission Form for Girl’s Science Day at Columbia University

I hereby give permission for my child or subject of my legal guardianship, __________________________ [name of child], to participate in Girl’s Science Day at Columbia University in the City of New York on November 19, 2011.

I understand:

1. That this event includes the use of chemicals and that the event is under the supervision of graduate students and faculty of Columbia University
2. That, where appropriate, the participants may be asked to wear protective gear such as goggles and gloves, which will be provided by the supervisors, and
3. that participants will be required to obey all safety mandates and instructions from Chemistry and Physics Department staff and faculty and will be asked to leave the program in the event of non-compliance.

I have listed below any allergies, health conditions, or other physical conditions that might impact the participation by my child in this event.

______________________________________________________________________________________________________________________________________________________________

______________________________________________________________________________________________________________________________________________________________

Signature of Parent/Legal Guardian: __________________________ Date: _________________

Name of Parent/Legal Guardian: __________________________

Emergency contact phone number: __________________________