



**Georgia-Cumberland Conference
Pathfinder Department
Event Permission Form - Adventist Schools**

DATE: _____

Parent or Guardian's Name _____

Parent or Guardian's Address _____

Parent or Guardian's Telephone Number (during the day) _____

Please excuse _____ from school for the following day(s)
(Pathfinder's Name)

(Date(s) of event)

He/She will be participating in a Georgia-Cumberland Conference approved event at

_____ with the Pathfinder Club.
(Event Location)

(Parent or Guardian's Signature)

Club Director's Name _____

Club Director's Telephone Number (during the day) _____

If you have any questions regarding this event, please **first** contact the local club director.
For additional assistance, you may contact Conference Director John Swafford or his secretary in the Georgia-Cumberland Conference Pathfinder Department at (800) 567-1844, extension 344.