



PERMISSION FOR AN OVERNIGHT VISIT
BIG BROTHERS BIG SISTERS OF ITHACA & TOMPKINS COUNTY
A PROGRAM OF THE ITHACA YOUTH BUREAU



****Attention Volunteers****

You must also have permission from your Match Support Specialist before you can have an overnight visit with your Little.

I, _____ give permission for my son/daughter, _____
(name of parent/guardian) (name of child)

to have an overnight visit with his/her Big Brother/Big Sister, _____ on
(name of Big)

the following dates: _____ to _____.
(start date) (end date)

Signature: _____

Date: _____



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