

J-Jam permission slip

(First, Last)_____ has my permission to go to J-jam, the after school ministry program of Christian Life Assembly every Tuesday from 3-5pm. He/She also has my permission to ride from _____ (middle school) to the church with a frequency staff member or parent.

Parent's Signature:_____ Date: ____/____/____

Christian Life Assembly
2645 Lisburn Road
Camp Hill, PA 17011
717-737-6560

(School Copy)

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