

**Bath Township Recreation Department**  
**and Bath Township Public Library**  
**Teen Lock-In Permission Slip**

Date: 5/29/26

Time: 6pm-9pm

Location: Bath Township Public Library

Information: This event is only for youths in 6th-12th grade and is limited to 32 participants. The Bath Township Recreation Department is providing a rolling video game bus that will be at the library from 6:30-8:30pm. Since the bus can only hold 16 players at a time, upon arrival attendees will sign up to play for hour 1 or hour 2. While not playing on the bus youths can socialize, play games, or watch a movie in the library. The library will also be providing pizza, pop, and snacks during the lock-in.

Rules:

1. Permission slips must be turned in no later than Wednesday, May 27th at 7pm. **No exceptions!**
2. Permission slips must be signed by a youth's legal guardian.
  - a. Guardians cannot sign permission slips for youths other than their own.
3. When the library closes at 7pm any teen that has signed up for this event and is in the building is required to stay until 9pm unless there is an emergency.
4. No outside bags, food, or drinks (including water bottles) will be allowed during the event.
  - a. If the youth has their backpack from school, it will be locked in an office for the duration of the event.
5. Attendees must be picked up at 9pm by an adult listed on this form. The adult will be required to come into the library and sign out the youth.
  - a. If not picked up by 9:20 and an adult listed on this form cannot be reached by phone, emergency services will be notified.
  - b. Emergency contacts and caregivers authorized to pick up an attendee must be over 18 and out of high school.
6. If a youth engages in violent or destructive behavior, a caregiver will be called and expected to pick up said youth immediately. If staff is unable to reach a caregiver or the emergency contact, emergency services will be contacted.

Youth Name\_\_\_\_\_

Grade\_\_\_\_\_

Legal Guardian (Printed)\_\_\_\_\_

Legal Guardian Address\_\_\_\_\_

Legal Guardian Phone Number\_\_\_\_\_

Emergency Contact Name\_\_\_\_\_

Emergency Contact Phone Number\_\_\_\_\_

My child is authorized to be picked up by (give full name and phone number):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are there any allergies or health issues that staff should be aware of?\_\_\_\_\_

\_\_\_\_\_

Does staff have permission to seek medical attention for youth in case of an

emergency?\_\_\_\_\_

Signature of Legal Guardian\_\_\_\_\_

Date of Signature\_\_\_\_\_