



# D.I. Permission Slip

**YES!!! I want to be a part of the fun!**

**Student Name** \_\_\_\_\_ **Grade** \_\_\_\_\_

**Teacher** \_\_\_\_\_ **Phone Number** \_\_\_\_\_

**Have you ever been in Destination Imagination (D.I.) before? If so, who was your manager?** **Yes/No**

\_\_\_\_\_

**Who are the other members of your team for this year? Please list first and last names.**

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

**Who will be your Team Manager(s)?**

DI is only made possible by the active support of people like you! Each team (of 5-7 wonderful kids!) needs a minimum of 1 team manager. For those new and returning to our program, DI does offer local training workshops to help! In addition, each team competing in our regional spring tournament is required to provide 1 appraiser/judge (can be a neighbor, relative, student teacher, high school senior needing community service hours, ANYONE who loves kids) and 1 tournament volunteer. Please consider your part in making our program a success!

Please print clearly.

**Parent's name** \_\_\_\_\_ **Parent's phone** \_\_\_\_\_

**Parent's Email** \_\_\_\_\_

**I am available to be a Team Manager!** Yes/ No

**I am available to be Tournament Volunteer! (3 hours, day of tournament)** Yes/ No

**I know someone who would be willing to be an appraiser/judge!** Yes/ No

**If Yes, appraiser's name:**

\_\_\_\_\_ **Phone#** \_\_\_\_\_

**RETURN TO THE OFFICE OR MS. HAGER BY: Friday, Oct. 4**