Betty J. Johnson North Sarasota Public Library

Teen Room After Hours Event

Enjoy VR and NERF games, crafts, movies, food, and more at this FREE event!

**Program Date and Time:** Friday, September 30, 2022 from 5 – 7 p.m.

**Important details:**

☐ This part of the event is open to tweens and teens in 6th grade through 12th grade.

Families of teens are invited to our Teen Room Open House in the Edward James II Meeting Room during the event. Meet some of our community partners, learn about the library, and enjoy a free dinner!

☐ In addition to our other offerings, this event will include a movie screening selected by the teens (up to a PG-13 rating), as well as video games with up to a Teen rating.

Drop-off time for the event is 5:00 p.m. Pick-up time for the event is 7 p.m. All minors must be picked up (or off library property) by 7:15 p.m.

**A signed permission slip must be used as a ticket in on Friday, September 30 starting at 5 p.m. Any minor without a permission slip will not be granted entrance into this portion of the event.**

**Rules:**

Have fun!

No tobacco, alcohol, or drugs (unless medically prescribed).

Staff work areas are off-limits.

Be respectful of others.

Follow library rules of conduct.

Disrespectful behavior of any kind will result in an immediate phone call home.

For more information, please contact:

Lindsey Trammell | Youth Services Librarian | 941-861-1363 | [ltrammell@scgov.net](mailto:ltrammell@scgov.net)

Erin Clay | Library Manager | 941-861-1368 | [eclay@scgov.net](mailto:eclay@scgov.net)

Betty J. Johnson North Sarasota Public Library, 2801 Newtown Blvd., Sarasota, FL 34234

**Teen Room After Hours Event**

**Friday, September 30, 2022, 5-7 p.m.**

**Use this form at 5 p.m. to gain entry to the event.**

**To be completed by parent or legal guardian:**

Teen’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Parent or Legal Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone where parent/guardian can be reached DURING EVENT**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Alternate Emergency Contact Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Alternate Emergency Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Child’s Physician \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide any additional information about your teen that may be helpful (allergies,

medication, etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

I have read all the attached information and give my permission for my child to attend the Teen Room After Hours event at the Betty J. Johnson North Sarasota Public Library on Friday, September 30, 2022. I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (LEGAL GUARDIAN), agree to hold Sarasota County harmless for any accidents or mishaps which may involve my children. Further, I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (LEGAL GUARDIAN), assume all liability for my child’s conduct and any incidents and specific losses arising from that conduct or participation in the event listed above and release Sarasota County from any liability for losses arising from the event. If my child(ren) should become seriously ill or injured, I authorize you to arrange for any emergency medical care needed. It is understood that I (parent/guardian) will be responsible for expenses incurred in the event of such treatment**.**

**I agree to pick up my child at 7 p.m. on Friday, Sept. 30 at the Betty J. Johnson North Sarasota Public Library.**

 Signature of Responsible Party: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_

 Relationship to Participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Received by Sarasota County:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Date & Name)

Return this form to the library before or at the event on **Friday, September 30, 2022.** One form must be completed for EACH attendee. Attendance is limited to teens in grades 6-12.