

## MFAA Pre-arranged Departure Form

Necessary only for departures from campus for religious services or other approved absences with non-Academy persons.  
Students attending local Presbyterian, Baptist and Catholic churches with MFAA staff need not fill out this form.

Student's Name \_\_\_\_\_

Parent's Name \_\_\_\_\_

Parent's Emergency Contact Information (phone) \_\_\_\_\_

*Please fill in the information below. Provide information separately for each specific date of departure. Time of return may be approximate but please estimate as closely as possible. Include all dates for which departures may be requested. A student may opt out of a pre-arranged departure but no additional departures (besides emergencies) may be arranged after registration.*

Note: Transportation should always pick up and drop off at Wells Residence Hall, 1132 E. Madison.

Departure Day/Date	Departure Time	Return Time	Address of Destination	Transportation provided by (Name)	Contact Phone#

**Student Statement of Responsibility:** *I recognize I am responsible for notifying my Resident Assistant and appropriate faculty members when I am leaving for a prearranged departure. I am responsible for meeting my transportation provider at Wells Residence Hall and joining the Academy or waiting in the lobby of Wells as instructed upon my return. I realize I may miss some Academy programming (curricular or co-curricular) during my absence.*

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent Statement of Permission:** *I recognize my child will be leaving the supervision of the Missouri Fine Arts Academy during the times listed above. I realize my child's arranged transportation is not provided by or supervised by the MFAA. I give my permission for the departures listed above. I recognize my child may opt not to attend the services listed above and no others will be approved after registration.*

**Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_