

Cochran County Historical Commission  
Texas' Last Frontier Historical Museum  
Cochran County Junior Historians

**Junior Historian Membership Permission Form**

Please print clearly. Please complete all fields. Use only blue or black ink. Bring this form with you to the next regularly scheduled Cochran County Historical Commission meeting, the second Thursday of each month at 5:00 p.m. at the Texas' Last Frontier Historical Museum.

<b>Child's Name:</b>	
<b>Age:</b>	<b>Grade:</b>
<b>Date of Birth:</b>	<b>Phone:</b>
<b>Address (street, city, state, zip code):</b>	
<b>E-mail Address:</b>	
<b>Emergency Contact (name, phone number &amp; relationship):</b>	
<b>Please list any food allergies your child may have, if none, please state "none"</b>	

I, (print name) \_\_\_\_\_, parent or legal guardian of  
(child's name) \_\_\_\_\_, hereby give permission  
for my child to join the Cochran County Junior Historians.

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Date