



St. Mary's Ryken
A Catholic College Preparatory School

PERMISSION FORM TO VISIT COLLEGE CAMPUS

DATE: _____

NAME: _____ GRADE: _____

DATE OF VISIT: _____

COLLEGE: _____

CITY AND STATE OF COLLEGE: _____

STUDENT SIGNATURE: _____

PARENT SIGNATURE: _____

**THIS FORM MUST BE COMPLETED AND RETURNED TO THE ATTENDANCE
OFFICE PRIOR OT THE COLLEGE VISIT.**

22600 Camp Calvert Road
Leonardtown, MD 20650
301-475-2814 301-373-4185

