

PERMISSION FORM



Name of Parent: _____

Name of Youth ("the Participant"): _____

Date of Event: _____

I give permission for the following (check all that apply):

Youth to leave the Church campus with appropriate adult (21+) supervision

Allow youth to ride in a vehicle with a youth driver (16-18 yrs old)

If yes, please below list designated youth that are allowed to transport your youth:

Contact Details (of young person) – *fill in if applicable*

Mobile Number: _____ E-mail: _____

Health Declaration

In the event of an emergency it is vital we have contact details for your son/daughter.

Any known allergies/disabilities: _____

Emergency Numbers

Name: _____ Number: _____

Name: _____ Number: _____

I agree that the information stated above is correct and that the information may be distributed to leaders it may concern. I am the parent or legal guardian of the Participant. I have read this document, and I am signing it freely. I understand the legal consequences of signing this document, including (a) releasing the Church of Grady County from all liability on my and the Participant's behalf, (b) waiving my and the Participants' right to sue the Church of Grady County, (c) and assuming all risks of Participant's participation in this Activity, including travel to and from the Activity or any events incidental to this Activity. I allow the Participant to participate in this Activity. I understand that I am responsible for the obligations and acts of the Participant as described in this document. I agree to be bound by the terms of this document.

Signed (parent / guardian): _____