

Youth Ministry Permission Slip

Calvary Chapel Surprise

This is to certify that _____ has my permission to participate in any and all functions, activities, or events of the Youth Ministry of Calvary Chapel Surprise, whether on site or off site. I understand that it is not necessary to sign this permission slip for my child to participate in the Youth Ministry. I agree that a copy of this slip is as valid as the original.

As parent or legal guardian, I release Calvary Chapel Surprise and all of their officers, employees, volunteers, and agents acting officially or otherwise, from any medical, injury, or other liability. I understand that this an open ended permission slip and is valid through my child's 18th birthday.

- I Deny permission to use my child's image at all.
I Grant permission for my child's image to be used in print, video, and/or digital media. I agree that these images may be used by Calvary Chapel Surprise for a variety of purposes and that these images may be used without further notifying me. I do understand that the child's last name will not be used in conjunction with any video or digital images.

I give my son/daughter permission to drive as a passenger with all youth leaders and the following people.
(Please check ALL that apply)

- Other Parents
 Any licensed student.
 The following licensed student(s). _____

(Please note that high school students do not drive for Jr. High activities.)

Student's Grade _____ Student's School _____

Student's Birthday _____ Student's Cell # _____

Student's E-mail _____ Parent's E-mail _____

I hereby give my permission and authorize emergency medical treatment for my child in the event that I cannot be contacted.

Parent/Guardian Name _____

Address _____ City _____ Zip _____

Home Phone _____ Cell Phone _____

Medical Insurance Carrier _____ Phone _____

Policy Holder's Name _____ Pol. # _____

Insurance Group (if applicable) # _____

In case parent/guardian cannot be reached, contact: _____

Relationship _____ Phone _____

(Parent/Legal Guardian Signature)

(Date)

(Parent/Legal Guardian Name – Printed)