

Church Activity Permission Form
(For ALL Participants)

I, _____ do give my permission
(Parent/Guardian's Name)
for _____ to participate in
(Student's Name/Self if over 18)
_____. My emergency contact
(Scheduled activity and date)
number during this event is _____.

In case of accident in transit or on location, I do not hold Spotswood Baptist Church or adult chaperones responsible for injuries and understand that my insurance will cover such circumstances should they occur, as the Primary Insurance carrier. I also give my permission for the group leader or an adult to authorize medical treatment for my child at the nearest emergency care facility, should an injury or illness occur. I also understand that certain behavioral guidelines have been placed upon my youth/child during this trip. I understand that he/she is expected to adhere to these guidelines. In addition, I understand that failure to follow these guidelines could result in him/her being sent home at *my expense*.

(Signature of Parent/Guardian) _____
(Date)

_____ Please initial if you authorize SBC to include pictures of this student on the church website and in printed material. First names only will appear in any picture description.

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