

Church Name: _____ Pastor Name: _____

YOUTH/KIDS/PRE-SCHOOL Permission Form

EXCEL

This form MUST be completed for every teen/child wishing to participate in activities (including Flag Football, Basketball, Volleyball, and Dodgeball for the teens). Please attach this form to your church's pre-registration form.

First Name: _____ **Last Name:** _____

Age: _____ **Grade:** _____ **Birth Date:** ___/___/___ **Gender:** ___M ___F

Participant attending (please circle one) YOUTH VENUE KIDS' VENUE PRE-SCHOOL VENUE

NOTE: Child MUST be potty-trained in order to attend the Pre-School Venue.

YOUTH ONLY: Participant will ride the bus from ADULT VENUE to Youth Venue. ___Yes___ No
If yes, participant must be at ADULT VENUE site no later than 8:30 a.m.

Emergency Contact Person: _____

Emergency Contact Phone Number: _____ - _____ - _____ **Relationship to Participant:** _____

Any allergies: ___Yes ___ No If yes, please list: _____

Any physical/dietary restrictions: _____

Parent/Guardian attending (please circle one venue) ADULT YOUTH KIDS' PRE-SCHOOL

Parent/Guardian MUST attend Adult VENUE if child is registered for Pre-School VENUE.

Name of Escort/Chaperone from your Church (Youth Venue) _____

Liability/Medical Release ~ Release of All Claims

We, the parents/guardians of _____ (TEEN/CHILD'S name) do release and agree to hold harmless the Northeast District of The Wesleyan Church, the Bethany Wesleyan Church of Cherryville, PA and the director and staff of the YOUTH VENUE and the director and staff of KIDS' and PRE-SCHOOL VENUES from any and all liability, claims, or demands for personal injury, as well as damage and expenses, of any nature that may be incurred by the parent/guardian and teen/child-participant that occur while the teen is participating in the above named convention.

We, on the behalf of our teen/child-participant, assume all risk of personal injury, damage, and expense as the result of participation in recreational activities involved.

Authorization and permission are given to said director/staff to furnish any necessary transportation and food for our teen/child participant.

We, as parents/legal guardians of the teen/child-participant, give our permission for him/her to participate fully in the YOUTH VENUE/ KIDS' VENUE/PRE-SCHOOL VENUE. We give our permission to take said participant to a doctor or hospital and authorize medical treatment and assume the responsibility of all medical bills, if any. We understand that we will be contacted if at all possible, but in the event that we cannot be reached, the director/staff may choose a reputable physician.

Name of Teen/Child Insurance Company Policy #

Father/Guardian Date Mother/Guardian Date