

Vineyard Lake Outing Parental Consent & Liability Release

My youth Vineyard Lake		has my permission to attend ough the supervision of First Baptist
We will leave fr	Church's youth pro om the church 10:30am and returning around	will drop students at their home upon
		cooperate with the group leadership,
Emergency Col	ntact	
Parent/Guardia	n	
Address		
City	Phone	Alt Phone
Known Allergie	s	
Medical limitati	ons	
to the physician seek proper me Liability Releas Every activity s supervised by r precaution, unf guardian agree related social a employees or veperson or properson or proper	edical treatment for my son of the dical treatment for the dic	emergency, I hereby give permission at Church staff to hospitalize and/or or daughter as deemed necessary. carefully planned and adequately en with the best of planning and By signing this form, the parent or isks and hazards inherent in churchest to hold this program/church or its damages, losses, or injuries to the ats or guardian understand that they and the signature is for both a
Parent/G	uardian Signature	Date
	n given. I understand that if	hip for this event and comply with all I do not, my parent will be called to
S	tudent Signature	Date