

Bethany Lutheran Church Jr./Sr. High Youth Ministry Permission Slip

Participant Name _____ Phone _____
Participant Address _____
Parent/Guardian _____ Phone _____
Emergency Contact _____ Phone _____

It is understood that transportation will be by church van, chartered bus, school bus, van or car driven by a licensed responsible adult. My child will be supervised by an employee of BLC or by one of the parents of the participants or a volunteer and that reasonable care and precautions can be expected at all times. We hereby recognize the inherent risk associated with the various youth activities and forms of travel, and agree to save and hold harmless Bethany Lutheran Church and their employees, volunteers, and agents from any liability or expense that may arise from my child's participation in youth events and any travel related incidents going to and from such event. I understand that my child will be expected to behave in a way that would properly represent themselves and Bethany Lutheran Church.

Parent/Guardian Signature

Date

For your information, we expect each student to conform to these rules of conduct:

No possession or use of alcohol, drugs, or tobacco No students can drive No fighting, weapons, fireworks, lighters, or explosives No offensive or immodest clothing No boys in girls' sleeping quarters and no girls in boys' sleeping quarters Participation with the group is expected. Respect property Respect one another, staff, and adult leaders Respect and comply with event schedules Students who fail to comply with these expectations may be sent home at their parents' expense.

I, the student, have read the rules of conduct, the above evaluation of my health, and permission to participate in youth group activities. I agree to abide by the stated personal limitations and code of conduct.

Student signature: _____ **Date:** _____

Activities may include, but are not limited to: cookouts, boating, water skiing, swimming, basketball, roller-skating, rollerblading, games in the park, soccer, ice skating, volleyball, softball, baseball, camping, downhill skiing, snowboarding, hiking, biking, concerts, Bible studies, golfing, miniature golf, tubing, water park or amusement park rides, or hayrides.

To consent to other/all youth activities of Bethany Lutheran Church, please sign below.

Note: *If you desire to limit your child's participation in an event, please submit your wishes in writing to BLC.*

_____ has my permission to attend all youth activities from **AUGUST 2016-AUGUST 2017** sponsored by Bethany Lutheran Church (herein after the "Church") This consent form gives permission to seek whatever medical attention is deemed necessary, and releases the Church and its staff of any liability against personal losses of named child.

I/We the undersigned have legal custody of the student named above, a minor, and have given our consent for him/her to attend events being organized by the Church. I/We understand that there are inherent risks involved in any ministry or athletic event, and I/we hereby release the Church, its pastors, employees, agents, and volunteer workers from any and all liability for any injury, loss, or damage to person or property that may occur during the course of my/our child's involvement. In the event that he/she is injured and requires the attention of a doctor, I/we consent to any reasonable medical treatment as deemed necessary by a licensed physician. In the event treatment is required from a physician and/or hospital personnel designated by the Church, I/we agree to hold such person free and harmless of any claims, demands, or suits for damages arising from the giving of such consent. I/We also acknowledge that we will be ultimately responsible for the cost of any medical care should the cost of that medical care not be reimbursed by the health insurance provider. Further, I/we affirm that the health insurance information attached is accurate at this date and will, to the best of my/our knowledge, still be in force for the student named above. I/we also agree to bring my/our child home at my/our own expense should they become ill or if deemed necessary by an employee of the Church

Parent/guardian signature: _____ **Date:** _____