

**Church of the Resurrection
Youth Permission Form**

Program:

Youth Name: _____ Phone # : _____

E-Mail Address: _____

Cell phone #: _____

Emergency Contact Information:

Name: _____ Phone# : _____ Cell

Phone# _____

Permission and release: My child _____ has my permission to participate in _____ . I understand that my child will be under the supervision of Church of the Resurrection staff and or volunteer chaperones, and that transportation will be in a bus driven by an adult 21 years old. I personally and on behalf of my child, hereby release the Church of Resurrection Catholic parish staff and or volunteer chaperones from any liability for any injuries or damages arising or resulting from participation in this event and /or transportation to and there from. In the event that I cannot be reached, I hereby grant permission for my son/daughter to be evaluated, diagnosed, treated and/or medicated in accordance with standard medical practice by licensed medical personnel. I also authorize Resurrection staff and volunteer chaperones to provide nonprescription medication (such as Tylenol, Ibuprofen, and non-alcohol base cough medicine) and routine first aid to my child.

Parent/Guardian Signature & Date

Special Medical and Allergy Information:

Allergies: _____

Special Medical Conditions: _____

Prescription Medication _____

Can your child be responsible for taking his/her own medication? Yes / No

Medical Insurance Information: Company: _____

Policy Number: _____ Phone: _____

Agreement:

I understand that for all Resurrection parish youth activities we promote an intentional Christian community where we have zero tolerance for the use of foul language, threats or any type of abuse, and inappropriate physical contact. This statement will be included in all permission forms and it represents an agreement to contribute to a safe and open community by all teens and adults involved. I give permission for any photographs taken of my child at this youth event to be used on the parish website or with any parish youth ministry public relations. My child's name will not be included with the photograph.

Parent/Guardian Signature