

2017/2018 Youth Permission Form

Flora Presbyterian Church

Child's full name: _____
(First) (Last) (Goes by)

Birth Date: _____ **Sex:** **M / F** (please circle)
Month/ Day/ Year

Current grade as of fall 2017: _____ **School attending:** _____

Name of Parent/Guardian: _____

Home address: _____ **City:** _____ **Zip Code** _____

Home phone: _____ **Cell phone:** _____

E-Mail Address: _____

Emergency contact Name: _____ **Phone:** _____

Contact relation to child: _____

Other than yourself who do you give permission to pick up your child from the church?

1. _____
(Name) (Relation)

2. _____
(Name) (Relation)

Family Church Affiliation:

Which Church do you call home? ☐ **Flora Presbyterian** ☐ **Cutler** ☐ **Flora 1st Christian**

☐ **Other:** _____ ☐ **Do not currently have a church home**

Health information (Please list any allergies, medications, health concerns, etc.):

Permission to participate in Church Activities: (please circle each line)

I give my permission for my child _____, to participate in Flora Presbyterian Church activities.

Y / N Is your child allowed to walk unsupervised between home and the church?

Y / N I understand that my child is not allowed to leave before the end of the program unless I pick them up

Y / N I understand that all activities will have adult supervision and I will receive advance notice of any activities in which my child will go off church property.

Y / N I give the adults in charge permission to seek emergency medical care if I cannot be reached and hold the churches and the adult leaders harmless if my child becomes ill or hurt.

Y / N I give permission for my child to be photographed and for pictures to be posted on church website& facebook.

Signed: _____ **Date:** _____
Must be parent/ legal guardian