

Permission Form for Junior Youth Group Activities

My child _____ has my permission to attend and travel with
(Child's Name)
the _____ Youth Group (for activities at church and off-site) _____ throughout _____ 2015-2016 _____ with the
(Event or Destination) (Dates)
Adult Leaders: _____
(Adult Supervisors from Church)

I, _____ also give permission for an authorized group
(Parent's Name)
chaperone to provide, seek and consent to emergency treatment in my absence for the well-being and care of my child. I assume financial responsibility for all medical costs.

Signature: _____ Date: _____
(Mother/Father/Legal Guardian)

Address: _____

(Town) (State) (ZIP)

Home Phone: _____ Parent Email(s): _____

Parents' Cell Phones: _____ & _____
(Mother) (Father)

Alternate Emergency Contact: _____
(Name) (Phone) (Relationship)

Child's Special Issues/Considerations (e.g., medical, learning, behavioral, allergies):

Prescription Medications: _____

Health Care Plan: _____

Policy No.: _____ Phone: _____

Primary Care Physician: _____ Phone: _____

Birth Date: _____ Last Tetanus Shot: _____ Blood Type (if known): _____

Authorization for use of Photos and Video:

- | | | |
|-----|----|---|
| YES | NO | It is OK to use photographs and video of my child for use within our church family (slideshows, bulletin boards, shared emails/photo sites among youth group families, etc.). |
| YES | NO | It is OK to use unidentified (i.e., without name) pictures or video of my child on the church website, or in print media (e.g., newspapers, service recipients' or donors' websites). |
| YES | NO | It is OK to post photos of my child on social media (i.e., church and/or Youth Group Facebook page). |