

Church Van Permission Slip

This form is to be completely filled out and signed by parent or legal guardian before a child may ride the van.

Please print:

Parent or guardian name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Other Phone _____ E-mail address _____

Please list all children of your household who have your permission to attend Church, Church function youth group, church related events, and/or it's Van Program(s).

CHILD'S NAME		CHILD'S RELATIONSHIP TO YOU				
<u>First</u>	<u>Last</u>	<u>Son</u>	<u>Daughter</u>	<u>Other</u>	<u>Age</u>	<u>DOB</u>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____

Do any of the above have allergic reactions to any medications? Yes No
 If so please list their names and the medications to which they are allergic:

I hereby give my permission for all the children listed above to ride the van, participate in activities, and attend Grassland Community Church or any of the church related functions. I understand that my children will be under adult supervision. I further understand that in signing this permission slip, I release and hold harmless Grassland Community Church and all other church-related functions. By signing this permission slip, I release and hold harmless its trustees, officers, employees, interns, and any volunteers from any liability, past or future, fully and completely. I authorize the staff or designated medical professionals and/or volunteers to administer emergency medical assistance if I cannot be reached.

Parent or legal Guardian signature _____ Date _____

For GCC Staff use only New

Route _____ Stop _____ Update

Complex _____ Above Information Complete? Yes No Van Driver's Initials _____

Youth Leader's Initials _____

