

PARENT INFORMATION AND RELEASE FORM

Highland Baptist Church

Parent/Guardian Information and Permission Form

Name of Activity _____ Date(s): _____

(Please print)

Name of student _____

Health Card # _____

Allergies: _____

Please indicate any other health concerns and medications on the reverse of this page.

Date of birth _____ Age _____ Sex _____ Phone # (____) _____

Address _____

City _____ Province _____ Postal Code _____

Emergency Contact Name _____

Emergency Contact Phone Number _____

- I give Highland Baptist Church to use my child's photo reasonably and responsibly for advertisement, and web page purposes.

As parent/legal guardian of the student named above, I have reviewed the information about the youth ministry activity/event and give my permission for him/her to be involved in the activity listed above. I also give permission for the above named youth be transported to and from the event location (if required) as well as any other transportation needed during the event times such as but not limited to: approved off site activities, emergency transportation, etc.

Highland Baptist Church will do all that it can to ensure that your child is safe during this event/activity. As parent/legal guardian of the student named above, we recognize that Highland Baptist Church will do all that it can to ensure my child's safety, and in the event of an accident where the student experiences loss, damage, or injury, we will not hold Highland Baptist Church, it's leaders, staff, ambassadors, or members responsible.

Parent/Guardian Signature _____ Date _____