

## Parent Permission Form

A brief description of the activity:

Name of event \_\_\_\_\_

Destination \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Designated leaders:

Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Date \_\_\_\_\_ Time \_\_\_\_\_ Cost \$ \_\_\_\_\_

If you would like your child to participate in this event, please complete, sign and return the following statement of consent and release of liability. As a parent or legal guardian you remain fully responsible for the actions and conduct of your child, including any legal responsibility which may result. I hereby consent to participation by my child, \_\_\_\_\_, in this activity. I understand that this event will take place away from the church facilities and that my child will be under the supervision of the designated person on the stated dates. I further consent to the conditions stated above regarding participation in this event. In consideration of my child's being allowed to participate in this field trip, I agree to indemnify and hold harmless Faith Community Church and its representatives, including chaperones, from any and all claims, including negligence, arising from or relating to my child's participation in this event. This indemnification and hold-harmless agreement does not apply to claims for intentional misconduct or gross negligence.

Parent/Legal Guardian (print)

\_\_\_\_\_

Parent/Legal Guardian (sign)

\_\_\_\_\_

Please return this form along with a completed Medical Release Form before departure for the event.