

Permission Slip

Youth Ministry of Chamblee First UMC

Event: Youth VBS

Price: \$75

Dates: July 31 & August 1 Time: 8:00am – 5:00pm

I give permission for _____ to go on the above stated trip with the Youth Ministry of Chamblee First UMC. I understand that the trip will be away from the campus of the church for the above stated time. The participant may ride on the rental church van, the rental bus, or on MARTA with ADULT members of the church to and from the event.

Initial Below

_____ **1.** I hereby authorize a representative of Chamblee First United Methodist Church (CFUMC) to give consent for any and all medical care for my child while said child is in CFUMC custody. I further agree to be responsible for the expenses of any such medical care or treatment, including transportation expenses, and to hold harmless and release CFUMC, its pastors, employees, agents, and volunteers from any and all liability for any injury, loss, or damage to personal property that might be suffered by said child as a result of such medical treatment or care or as a result of any reasonable palliative measures that such pastors, employees, agents or volunteers might take to said child’s attendance by trained medical personnel.

_____ **2.** I further grant permission to CFUMC, its pastors, employees, agents or volunteers to take and use the child’s first name, picture or photograph in all forms and manner for display, publication, advertising, promotion and any other lawful purpose.

_____ **3.** The undersigned further releases and holds harmless and forever discharges CFUMC, its pastors, employees, agents or volunteers from any and all past and future claims, damages, liability or cost arising out of or related to the aforementioned medical care and picture uses.

_____ **4.** If the child is a minor, the undersigned represents that the undersigned is the parent or legal guardian of the child and has legal authority to execute this agreement.

Home: _____ Cell: _____

Email: _____

Parent’s Signature _____ **Date** _____

Signature of parent/guardian for permission, liability, medical, and photo release.