

The Youth Groups at Bethlehem Christian Church
Event Permission Sheet

Event Information

| | |
|-----------------|-----------------------------|
| Event Name | |
| Event Location | |
| Event Date/Time | Group Leader Contact Number |

Statement of Permission

By signing below, I give my permission for my child to attend the above named event, and to fully participate unless otherwise indicated below. Knowing that the Bethlehem Christian Church youth leaders and their assistants will take utmost care of my child's safety, I understand that accidents do occur and that in such situations immediate steps must be taken to secure my child's health. I hereby authorize the Bethlehem Christian Church youth leaders and their assistants to seek medical attention for my child should an emergency arise, provided that I will be contacted as soon as possible. Failure to reach me shall not prevent an application of immediate, necessary medical treatment, not excluding injection, anesthesia, or surgery. I further agree that the Bethlehem Christian Church youth leaders and their assistants shall be held harmless in the event of accident or injury. In that regard, I understand and agree that Bethlehem Christian Church and its youth leaders and their assistants disclaim any and all liability in the unlikely event of injuries sustained in connection with this event.

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|---|--|
| Child's Name | Please Initial When Child is Picked Up After the Event |
| Phone Number(s) <i>(please list all numbers you can be reached at during the event)</i> | Parent's Signature/Date |
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