

ORION UNITED METHODIST CHURCH YOUTH PERMISSION FORM

Youth's name _____

Parent/Guardian name(s) _____

Parent/Guardian phone numbers during activity _____

Date _____ Activity/Location _____

By signing below, I recognize and will abide by the following:

- 1) Youth attending the activity will be supervised by adult sponsors.
- 2) NO energy drinks, alcohol, tobacco, weapons, fireworks, illegal substances, etc. are allowed.
- 3) Participants are expected to display respectful behavior, language, and actions.
- 4) All youth must have this form (signed by a parent or guardian) in order to attend the activity.
- 5) Parents/guardians will be called of any youth leaving the activity before the designated ending time. At this point, youth become the responsibility of their parents/guardians.
- 6) All youth will remain at the activity/event during the time of the event.
- 7) Parents will be called and youth will be sent home if any serious problems occur. This will be at the discretion of the adult sponsors.

I give my child permission to attend the Orion United Methodist Church activity on the date and location listed above. I give adult sponsors permission to seek and authorize medical treatment for my child if an emergency arises and I am unable to be reached. I agree to hold harmless Orion United Methodist Church and adult sponsors at the activity in case of any injuries and/or accidents.

Parent/Guardian Signature _____ Date _____

I agree to follow the rules listed above and I recognize the adult sponsors as having authority during the Orion United Methodist Church activity.

Youth Signature _____ Date _____

PARENTS/GUARDIANS: Please note any special medical concerns you want us to be aware of in the space listed below.