



## GBC kids permission slip

I give permission for my child \_\_\_\_\_ to travel with GBC children's volunteers by \_\_\_\_\_ to \_\_\_\_\_.

They will leave \_\_\_\_\_ and return \_\_\_\_\_.

The adult children's volunteers have my permission to seek medical assistance for my child if so needed.

My child is allergic to \_\_\_\_\_

Medication currently being taken \_\_\_\_\_

Any physical limitations \_\_\_\_\_

In case of emergency, our Doctor is \_\_\_\_\_ number: \_\_\_\_\_

Primary emergency contact name: \_\_\_\_\_ number: \_\_\_\_\_

Other emergency contact name: \_\_\_\_\_ number: \_\_\_\_\_

I authorize permission for my child's photo to be used by GBC for promotional purposes

Parent's signature: \_\_\_\_\_ X Date: \_\_\_\_\_

I absolve the church, the site and their employees and volunteers from responsibility for accident or injury which may occur during any aspect of this outing, including transportation to, from and during the event.

Parent's signature: \_\_\_\_\_ X Date: \_\_\_\_\_