

PERMISSION SLIP FOR YOUTH ACTIVITES

Newton Highlands Congregational Church

54 Lincoln Street, Newton Highlands, MA 02461 U.S.A.

I give my permission for _____ to attend the following event sponsored by Newton Highlands Congregational Church (NHCC):

I do hereby release and absolve said NHCC, its employees, agents, the sponsors of the function, and any church members from any and all liability for damages or personal injury caused to said minor as a result of his/her participation in and travel to or from said function.

I further agree to indemnify the NHCC, its employees, agents, the sponsors of the function, and any church members for any damage or injury caused by said minor.

I hereby authorize any necessary emergency medical treatment to be given to said minor, and specifically authorize any adult sponsor, attending physician, or hospital to consent to medical treatment for the minor, which said sponsor, attending physician, or hospital may deem necessary under the circumstances.

The following information is provided and may be relied upon in an emergency:

Allergic Reaction to Medication:

Food or Other Allergies:

Chronic Illness:

Health Insurance Plan:

Health Insurance Policy No.:

Home Phone No.:

Cell Phone No.:

Other Emergency Phone No.:

Passport No.:

Citizenship:

Passport Expiration Date:

Signed:

Parent or Guardian

Dated:
