

Student Permission Slip / Travel Waiver

Effective Dates June 1, 2023 to May 31, 2024

t is understood that (Name of Youth)	, has my permission
orivate car. I, as the legal parent and/or lega discharge the First Baptist Church of Canton	st Church of Canton and ride in the church van, bus, or lly appointed guardian, do hereby forever release and i, its agents, employees and officers from any claims or property while using the Church transportation / private ed activity.
cake whatever action they feel is warranted upon said student/child/young person. This authofficers or agents, at their discretion, to place any point for medical doctor for treatment or	on or any of its officers or agents is given full authority to under the circumstances regarding the health and safety nority will permit the first Baptist Church of Canton its e participants (at their family's expense) in a hospital at if no hospital is available, to place him/her in the hands essible to contact a doctor, the officer or agent may make ry.
Youth Name	Date of Birth
Allergies	Current Medications
Home Address/City/State/Zip	
Mother/Legal Guardian	Cell Phone
Work Phone	Email
- -ather/Legal Guardian	Cell Phone
Work Phone	Email
nsurance Company	Policy/Group #
Name of Insured	
If unable to contact said parent/legal guardia	nn in the event of an emergency, contact the following:
Name	Relationship
Home Phone	Cell Phone
Signature of Parent/Legal Guardian	 Date
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