

BETHLEHEM YOUTH GROUP PERMISSION FORM

Bethlehem Lutheran Church of Auburn, 1279 High Street, Auburn, CA 95603

Telephone: 9530) 885-4515

<http://www.bethlehemplutheranauburn.org>

(PLEASE PRINT LEGIBLY)

I, _____, as the legal guardian(s) of _____ do consent to his/her involvement in youth sponsored activities at Bethlehem Lutheran Church, 1279 High Street, Auburn, CA 95603. The undersigned does also hereby give permission for out (my) youth to ride in any vehicle driven by an approved **ADULT** chaperone while attending and participating in activities sponsored by Bethlehem Lutheran Church, 1279 High Street, Auburn, CA 95603. My child/youth and I understand that **SEAT BELTS** (if available) **SHALL BE WORN AT ALL TIMES** during transportation. I also give my permission for the leadership of the youth program to admit my child to a medical care facilities and give my authorization for my youth to be treated immediately if an injury or illness should occur while participating in youth program related activities. I do not hold Bethlehem Lutheran Church, 1279 High Street, Auburn, CA 95603 or its youth program or any of its leadership, or the Sierra Pacific Synod and its subsidiaries, responsible in any way for any incident or accident that may occur while participating in youth program. **(Please use the reverse side to explain any other additional or helpful information you feel we should be aware of... i.e. allergies, asthma, medications, etc.)**

I have read and fully understand the above permission slip and I do want my child to be allowed to participate in the Bethlehem Lutheran Church of Auburn, CA 95603 youth group(s) program and its activities. **If this form is not completed, signed and returned the youth will not be able to participate in the arranged event. Thank you for your attention to this important detail.**

Signature (**Legal Guardian**): _____

Printed: _____

Name: _____

Date: _____

Medical Insurance & Policy: _____

Company Name: _____

Policy#: _____

Phone #: (____) ____ - _____

Alt/Emergency #: (____) ____ - _____ Alt/Emergency Contact: _____