

Event Permission Slip

Derwood Bible Church Youth Ministries

16011 Chieftain Ave, Derwood, MD, 20855 301-987-0831

name of student]		
has my full permission to attend and participate in the activities sponsored by Derwood Bible Church on		
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[date[s] of event]		
[signature of parent/legal guardian]	[date of signature]	

By signing the above, in the event of a medical emergency and no relative or emergency contact can be reached, I authorize an adult, designated by Derwood Bible Church (DBC), in whose care my child has been entrusted, to consent to any x-ray examination, anesthetic, medical or surgical or dental diagnosis or treatment and hospital care to be rendered to my child under the general or special supervision and on the advice of any physician or dentist licensed under the provisions of the Medical Practice Act on the medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital. I shall be liable and agree to pay all expenses incurred in connection with such medical and dental services rendered to the aforementioned child pursuant to this authorization.

Should it be necessary for my child to return home due to medical reasons or otherwise, I shall assume all transportation costs.

I give permission for my child to ride in any vehicle designated by the adult in whose care my child has been entrusted while attending and participating in activities sponsored by DBC.

The individual identified on this form understands that all students are expected to abide by the program rules and be directly responsible to the Youth Pastor or Head Youth Leader on the trip/event. The DBC Youth Pastor / Lead Youth Leader assumes responsibility for discipline at the program and, if necessary, may, because of misconduct or disobedience, require a student to leave. In such instance, I will assume full responsibility for returning the student home.

Further, I do release and hereby agree to hold blameless DBC and its youth leaders from any and every claim arising, or which may be asserted by me or by any member of my family by reason of participating in any activities associated with DBC Youth programs or trips. I also release the lessor of properties on which the program is held. I agree to pay for any damages to DBC or lessor facilities as determined by DBC or program officials.

Further, I do allow DBC to use photographs and video footage shot at the program or trip of the individual named above for promotional materials.

Further, I do certify that said child is covered by adequate accident insurance. My consent and signature are given above on this page.

I have read and agree to the information given in this entire form.