



PARENTAL PERMISSION/ CONSENT FORM

AUGUST 2019 - AUGUST 2020

I give permission/consent for my teen _____, to participate in off site activities with the Frankfort First Church of the Nazarene from August 2019-August 2020.

By signing this form, I knowingly and voluntarily assume all risks involved in my teen participating in off site activities, and do thereby release the Frankfort First Church of the Nazarene and its members, employees, board members, and independent agents from any and all liability, damages, and at all costs and expenses arising out of/ or relation to bodily or psychological injury, loss of life, or loss of personal property that may occur as a result of participating in one of these activities.

I have read and accept the terms and conditions started herein and acknowledge that this agreement shall be effective and binding upon the parties during the entire period listed above.

Parent/ Guardian Name (printed): _____

Email: _____ Cell Phone: _____

Parent/ Guardian Signature: _____ Date: _____

Insurance Company: _____

Policy Number: _____

Please include any pertinent allergy or medical information that relates to your teens health:
