

Parental Permission Form

Child's name _____ Birthday _____ Age _____

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has/have my permission to attend Vacation Bible School (VBS) from **July 30th-August 1st** from **5:30 PM to 8:00 PM** at **Calvary Baptist Church 1243 Belmont Ave. SE Smyrna, GA**. I am the proper legal guardian for the child/children listed above and have authority to grant permission for them to attend the VBS. I understand that it is my responsibility to provide transportation for my child/children to and from the church.

Guardian Information

Address _____

City _____ State _____ Zip _____

Parent/Guardian _____

Home Phone _____ Cell Phone _____

Email address _____

Emergency Contact _____ Phone _____

Church _____ Pastor _____

Medical Release

Should my minor child/children listed above require emergency medical treatment as a result of accident or illness arising during the VBS, I consent to such treatment. I grant permission for the staff and volunteers working at Calvary Baptist Church for its VBS to consent to and authorize medical care for my child on my behalf and transport my child for medical care in the event of an emergency, and I agree to be financially responsible for any medical bills incurred as a result of emergency medical treatment. I have fully disclosed all of my child's allergies and medical conditions below.

Child's Allergies:

Medical Complications:

Release and Authorization

I acknowledge that the nature of the participation in the VBS may expose my child/children listed above to hazards or risks that may result in illness, personal injury or death and I understand and appreciate the nature of such hazards and risks. In consideration of and in return for my child/children listed above being permitted to participate in the VBS at Calvary Baptist Church, I hereby release Calvary Baptist Church (and its board, employees, and volunteers) from any and all liability, claims and actions that may arise from injury or harm to the above-listed child/children in connection with participation in the VBS and/or transportation to or from Calvary Baptist Church. I understand that this Release covers liability, claims, and actions caused entirely or in part by any acts or failures to act of Calvary Baptist Church (or its board, employees, or volunteers), including but not limited to negligence, mistake, or failure to supervise by Calvary Baptist Church (or its board, employees, or volunteers).

I have read and understand the entire contents of this Parental Permission Form, including the transportation section, the Guardian Information, the Medical Release, and the Release and Authorization and agree to be bound by its terms.

Parent/Guardian Signature

Date