

Reach Out For Christ Church  
(607)844-3000



318 Johnson Road  
Freeville, NY 13068

To: Reach Out For Christ Church: I, \_\_\_\_\_, the Parent / Guardian of \_\_\_\_\_ (child's name,) grant permission for my child to participate in the event described below:

Event/Destination: Youth Invasion at Reach Out For Christ Church, Freeville, NY 13608 & Owego, NY- Newberry's Donation Center & The JJ Newberry's Building on the corner of Main Street and Lake Street

Parent/ Guardian:

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Phone# \_\_\_\_\_

Date(s) of event/trip: 10/7/11- 10/9/11, Trip to Owego on Saturday, Oct. 8, 2011

Purpose: Helping Owego Flood Victims

Scheduled time of departure: 8:00am Sat. return: 6:30pm Sat.

Group attending: Youth Invasion Teens and Chaperones

Chaperone(s): Natalie & Caleb Vincent, Leah Stockholm, & Pastor Tom Miller

Method of transportation: Reach Out For Christ Church Volunteers

Does Child Have Asthma? \_\_\_\_\_ Is Child Up To Date With Their Tetanus Shot? \_\_\_\_\_

Child's special medical needs (if any): \_\_\_\_\_

Name and telephone number of doctor: \_\_\_\_\_

Emergency contact numbers:

1) Name \_\_\_\_\_ Phone# \_\_\_\_\_ Relationship \_\_\_\_\_

2) Name \_\_\_\_\_ Phone# \_\_\_\_\_ Relationship \_\_\_\_\_

Pick up time starts at 7:30am on 10/9, unless otherwise stated. All are welcome to stay for 10am church service.

**Person picking up child** \_\_\_\_\_ **When being picked up** \_\_\_\_\_

**Authorized to Treat Minor:** In the event that I cannot be reached in an emergency, I hereby permit the volunteers of Reach Out For Christ Church to call 911 and/or to contact a medical facility or physician selected by the church to provide proper treatment to \_\_\_\_\_ [child's name] and that I will be responsible for all expenses arising in association with such treatment.

**Parent/ Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Indemnity and Waiver of Claim:** I, \_\_\_\_\_ [Print Name], the undersigned, Parent/ Guardian of \_\_\_\_\_ [child's name], hereby acknowledge that as a condition of the Student participating in the activity, agree to indemnify and hold harmless Reach Out For Christ Church, its employees and volunteers, its governing board, the individual members thereof, and all agents and employees from any liability, lawsuit, cost, expense or claim of any type whatsoever (including legal fees) for any harm, injury or death arising out of the above mentioned activity.

**Parent/ Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_