

First Presbyterian Church, Cheyenne, WY

Children and Youth Permission Slip

Date(s) and Activities: **October 21st "Ellis Farms" Corn Maze and Pumpkin Patch (Lingle, WY)**

Leaving/Returning Times: **11:15am- 6:00pm**

List of Emergency Contact Numbers:

Name: _____ Phone: _____

Name: _____ Phone: _____

Attached are a list of things you need to bring and any additional forms you need to submit.

Please update medical and insurance information and return the attached signature page Please note, it is the parent/guardian's responsibility to ask questions and inform themselves and their child of the risks of any Church outing.

All prescribed and over the counter medication(s) will be given to the children/youth director prior to departure.

| <u>Medication</u> | <u>Dosage</u> | <u>Frequency</u> | <u>Given By</u> |
|-------------------|---------------|------------------|-----------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

I authorize the agents of the First Presbyterian Church (FPC) to administer the above-described medications to my child. I fully understand the First Presbyterian Church and their agents are not medical care providers and I understand the risk of injury or death to my child may result.

Signature: _____

Waiver of Transportation Policy

I authorize _____ (child/youth) to travel in a vehicle driven by FPC staff or FPC volunteers. I understand persons listed below **do not** meet the guidelines for drivers set forth by the policy of FPC, Cheyenne. I have read, understand and thereby waive the transportation policy set forth in **Policies and Procedures for Safeguarding Children and Youth and Adults to Whom They Are Entrusted.**

Indemnification Agreement

*I agree to indemnify and **hold harmless FPC and its ministers, leaders, employees, volunteers, agents or assigns** from any and all claims arising from any injury or death occurring while my children/youth is being transported by those listed above. I give my express **permission** for FPC to transport my child before, during, or after a **church-sponsored** activity.*

I represent that I am the parent/guardian of the child/youth named above, who is under 18 years of age. I have fully read all items of this permission slip and am fully familiar with the contents thereof.

By signing this document, I am fully aware of the inherent risks of travel to my child/youth and understand that injury or potential death to my child may result.

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Verified by _____ **Ministry Representative:** _____ **Date:** _____
