

Second Christian Reformed Church of Allendale

Specific Event Permission Slip and Information for GEMS, Cadets, SOS

My child, _____, has permission to attend

_____ on _____. I release the leaders and volunteers of Second Christian Reformed Church of Allendale from any legal liability for injuries suffered or damages incurred by my child. In case of medical emergency, I authorize the adult leaders to choose medical treatment (including hospitalization, surgery, dental treatment or other necessary medical treatment). Any medical condition the doctor should know about is listed below.

Medical condition _____

Insurance Carrier _____

Contract No. _____

Parent(s)/Guardian(s) signature _____

Address _____

Home phone no. _____

Cell phone no. _____

Work phone no. _____

Other information _____

Note: This permission slip MUST be returned to the group leader by _____.