

# Stone Ridge Church **AWANA Permission Form**

## PERSONAL INFORMATION

Child's Name:

Full Address:

Home phone:

Cell phone:

Birth date:

School Grade:

## EMERGENCY CONTACT INFO

Name:

Phone #:

Cell phone:

Relationship to student:

Restrictions:

Allergies:

Current Medications:

I, \_\_\_\_\_, the parent or legal guardian of the child named above, give permission for my child to participate in all off-campus activities involving the 5th & 6th grade Truth & Training group of Stone Ridge Church, Yuma, Arizona, AWANA Club for the 2011-2012 club year. I understand that my child will be transported by Stone Ridge Church and their leaders to all off-campus activities.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature