

## Forms are due Sunday, September 3rd

My child, has permission to participate in the following activity, which is being sponsored by Trace Creek Baptist Church on the date indicated:	
Description of Activity: SIX FLA	AGS, ST. LOUIS
Date and Time: SATURDAY, SI 11:30pm	EPTEMBER 9 <sup>th</sup> . DEPART @ 6:30 am. ARRIVE HOME @ APPROX.
Cost of Trip: \$30.00	EXTRA MONEY NEEDED FOR FOOD/SOUVINERS WE WILL NOT BE STOPPING TO EAT BREAKFAST!! BRING BREAKFAST TO EAT ON THE WAY, AND MAKE SURE YOU KEEP PLENTY OF MONEY TO EAT SUPPER ON THE WAY HOME.
In case of emergency or need:	
Father's Name:	Mother's Name:
Home Phone #:	Cell Phone #:
Medical Insurance Company:	
Policy #:	Family Physician:
Please notify us concerning medi "confidential" envelope.	cations, allergies, or other special needs. You may do so here, or in a
I have consented to participation by my PERMISSION FORM. In consideration execute this document with legal signific child/children, or a legal representative, the employees, or Church members whi	PARTICIPATION BY MINORS IN CHURCH SPONSORED ACTIVITIES minor son/daughter in the Church sponsored activity described in the accompanying for my son/daughter being allowed to participate in the activity, I am being asked to cance which I understand is intended to affect legal rights which I, my spouse, my could possibly have against Trace Creek Baptist church, Mayfield, Kentucky, the Pastors, ch arise out of, or relate to, my son's/daughter's participation in this activity. By signing on the behalf of any other person who might claim a right:
Parent or Legal Guardian	Date