

Permission & Info Form

YOUTH INFO

Name:	Date of Birth:	Age:	Grade:
Phone:	Email:		
School:			

PARENT / GUARDIAN INFO

Your relationship to your youth:	🗆 parent	🗆 guardian	Phone: _			
Email:						
Would you like Bethany to know	something al					
How did you first hear of Bethany						
□ My friend:	🗆 My you	th 🗌 www.bo	ethanybfc.org	□ Other:		
Emergency Contact (someone othe	r than you, th	ne Parent/Guardiar	ı):			
heir name: Their relationship to your youth:				r youth:		
Their phone number:						

PARENT / GUARDIAN PERMISSION

Medical Attention: While safety is a top priority of Bethany Bible Fellowship Church (henceforth "Bethany") I realize that accidents, injuries, sicknesses, and death do occur. If my youth experiences a health emergency, Bethany may seek immediate medical attention for my youth. Liability: Bethany is not responsible if my youth experiences accidents, injuries, sicknesses, or death. *Pictures/Videos*: Bethany may post pictures/videos of my youth on (but not limited to) social media and bulletin boards. *Communication*: Bethany may communicate with my youth. *Transportation*: Bethany may transport my youth in church vehicles and personal vehicles. *Leaving On Their Own*: May your youth leave Bethany on their own after an event is over? Yes. No. *Pick-Up*: May your youth be picked up from Bethany by someone other than you? Yes. No. If you answered "yes", please provide the names of 1-2 people: Person 1: _____ Person 2: _____ **Permission Statement:** (Name of your youth) ______ may participate in Bethany Youth events during the summer of 2023 and the 2023-2024 school year. Date: _____ Name: _____ Signature: _____