

St. John's Episcopal Church
6715 Georgetown Pike
McLean, Virginia 22101
(703) 356-4902

PERMISSION FOR YOUTH ACTIVITIES

I hereby give permission for my minor son/daughter (name) _____
to participate in youth activities of St. John's Episcopal Church, McLean, Virginia. This shall
include all sponsored activities on or off Church property (including any and all activities
involving travel and/or lodging) unless otherwise limited below. For those activities held off
church property, I understand that transportation to and from those activities may be by means of,
without implied limitation, private vehicles, or other conveyance. I understand that reasonable
precautions will be exercised by the adults chaperoning each event (and all travel associated
therewith), but that neither the adults chaperoning such trips nor the Church will be responsible
for theft of or damage to personal property, nor for bodily injury. I understand that under
ordinary circumstances accidents can occur and that injuries can result. Unless otherwise noted
below, I certify that my child is of normal health and is physically able to participate in such
activities. Any allergies, medications or special needs have been noted on this form. This
permission shall remain in effect until August 31, 2010, unless it is terminated by me in writing.

Parent/Guardian Consent: _____
(signed) (date)

GENERAL INFORMATION:

	Home Telephone	Work Telephone
_____ (Father's Name)	_____	_____
_____ (Mother's Name)	_____	_____
_____ (Emergency contact if other than above)	_____	_____

YOUTH INFORMATION: M F

Name: _____ Date of birth: _____ SSN: _____

Address: _____

Phone Number: _____

Medications (prescription and non-prescription): _____

Drug Allergies: _____ Other Allergies: _____

Date of last Tetanus booster: _____

Special Needs/ Limitations: _____

Family Doctor: _____ Phone No. _____

Health Insurance: (Insurer) _____

(I.D. #) _____

(Name of policy holder) _____

(Copy Attached-Back and Front) _____