

**Stonebridge Community Church**  
Youth Activity Permission Form

Student Full Name: \_\_\_\_\_

Student Home or Cell Number: \_\_\_\_\_

Address: \_\_\_\_\_

I/we, \_\_\_\_\_, the parent/legal guardian of the above named child, hereby give my/our consent for him/her to participate in off-campus activities with the Stonebridge Community Church Youth/Student Ministry. I/we assume all risks and hazards incidental to such participating, including transportation to and from the activity, and I/we hereby waive, release, absolve, indemnify, and agree to hold harmless Stonebridge Community Church, sponsors, supervisors, organizers, and persons transporting my/our child to or from such activity, for any claims out of an injury to my/our child, except to the extent and in the amount covered by accident or liability insurance.

I also understand that in the event of an emergency or medical need, I have given my permission to have my child receive medical treatment by the best means available. I understand that I will be notified as soon as possible if an emergency occurs.

Student: I agree to follow ALL guidelines/rules set by the Youth Ministry staff while participating in Youth Ministry activities. I understand that if I disregard these guidelines or any others given, my parent(s) or legal guardian(s) will be contacted and expected to pick me up from the Youth Ministry activity.

Student Signature: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Emergency Phone Number (Cell): \_\_\_\_\_

*BOTH signatures of the parent and student are required.*