

IMPORTANT: This is a general permission slip and is valid for any youth ministry event. Please complete this form, sign it, and then have your student turn it into to the Youth Director at the start of this event. Only one form per family is necessary.

First Presbyterian Church
233 West Ave South
La Crosse, WI 54601
608-784-4248

Permission Form – General Youth Ministry Event

Event Name: _____

Event Date: _____

Student(s) Name(s): _____

DOB(s) & Age(s): _____

Parent Name: _____

Contact Phone #: _____

Home Address: _____

Secondary Emergency Contact (Name): _____

Relationship to student: _____

Contact Phone #: _____

Hospital Preference (*please circle*): MAYO GUNDERSEN LUTHERAN

Name of Physician: _____

Health Insurance Company: _____

Any allergies other medical conditions that we need to be aware of? *Please specify:* _____

Who will drop-off and pick-up your student(s)? _____

Any other notes that you would like to make regarding your student and this event? _____

STATEMENT OF CONSENT: *“By signing this form, I am giving permission for the students mentioned above to attend this youth ministry event sponsored by First Presbyterian Church. In the case of medical emergency, I give the director of this event permission to choose a licensed physician to perform any necessary or recommended treatment. I will assume liability for any expense not covered by my insurance.”*

Signature of Parent/Guardian: _____ Date: _____

EMERGENCY CONTACT #:

Should you need to contact your child at any time during event, call the following number...

952-594-2241 (Cell Phone of Youth Ministry Director, Alex Jerve)