PARENT OR GUARDIAN MUST READ, CO	OMPLETE, SIGN.	. AND SUBMIT TH	IIS FORM.
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## **PERMISSION FORM**

i (we), parent(s) or guardian(s), sponsored activity:	give permission	on for my (our) (	child to participate in the following YUKE (YUKE Youth Ministries)
NAME OF CHILD:			FOR: School Year 2018-2019
CHOOL: GRADE:			
PLACE:			
NATURE OF ACTIVITY:			
TYPE OF TRANSPORTATION:	YOKE Folk wi	II transport stud	ident in their personal vehicles
SPONSOR OR CO-OPERATIN	G ORGANIZAT	ΓΙΟΝ:	
	for personal in	jury to, or caus	nts, and the co-sponsoring organization, if any, and each of its individual sed by, my child, and for all property damage. We assume all risk of such and damage whatsoever.
(we) give YOKE permission to a	ict in seeking e hission is also d	mergency med lirected to those	effort will be made to contact me (us). If such contact is not possible, I dical treatment for such child in the event that such treatment is deemed se administering emergency treatment, using such measures as they deem is regard.
copyright, distribute electronical advertising, trade or any other la promotions. I (we) hereby releatiability or claims or damage whapprove final use of materials or	ly and/or use a awful purpose. se and hold ha atsoever in con overed hereund	ny still or motion I (we) understant I we) understant I was the abounection with safer. I certify the	ircle one) YOKE YOUTH MINISTRIES full unrestricted rights to publish, ion pictures, photograph of my (our) child for use in editorial content, art, stand my (our) child's likeness may be used in advertising and/or love named, its successors, employees, agents, and assigns from any said use of my (our) child's likeness. I waive any right to inspect and late I (we) am (are) 18 years of age and have included my (our) name and lase, and certify that the information provided is true and accurate.
SIGNATURE(S) OF PARENT(S	s) OR GUARDIA	AN(S):	
PARENT/GUARDIAN NAME			ADDRESS
CITY	STATE	ZIP	PHONE NUMBER(S)
IF PARENTS ARE NOT AVAILA	ABLE CALL RE	ELATIVE OR O	OTHER CONTACT PERSON BELOW:
NAME:			DHONE(C)
	PHONE(S)		

