

Damascus United Methodist Churches
c/o 9700 New Church Street
Damascus, Maryland 20872
2011 - 2012 Youth Fellowship Annual Permission Slip
(Complete one per student)

My son/daughter _____ has my permission to attend all activities, for the year 2011 -2012 associated with the Damascus – Friendship United Methodist Youth Fellowship.

Parents agree to hold harmless and otherwise indemnify for any injuries or losses, the church, pastors, assistants, and all volunteers who give their assistance to the youth ministries of Damascus – Friendship United Methodist Churches.

Parents also agree, in case of an emergency requiring immediate medical attention, to authorize any of the adult leaders associated with Damascus – Friendship United Methodist Churches accompanying my youth to seek or provide medical care for my youth. Also, parents agree that simple pain relievers (Aspirin, Ibuprofen, etc...) can be given to youth if needed.

Parents also authorize any doctor, hospital, or other medical care institution or practitioner to provide necessary medical care or hospitalization to my youth, a minor child, upon request of one of the adult leaders associated with the Damascus – Friendship United Methodist Churches.

My youth has my permission to ride in the Church van driven by an adult leader: ___Yes ___No
My youth has my permission to ride in a car driven by an adult leader: ___Yes ___No
My youth has my permission to ride in a car driven by a young adult 18 or older: ___Yes ___No
My youth has my permission to drive self and siblings: ___Yes ___No

Is your youth now on medication? _____ If yes, describe: _____

Does your youth have any allergies or any specific problems that the adult leaders should know about? If so, describe:

Print Full Name: _____ Relationship: _____

Signature: _____ Date _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Emergency Contact Person: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

PARTICIPATION AGREEMENT

By signing below, the participant (or parent/guardian if participant is a minor) acknowledges and accepts the risks of physical injury associated with participation in the activity described above. Except for gross negligence on the part of the sponsor, the participant (or parent/guardian) accepts personal financial responsibility for any bodily or personal injury sustained during the activity. In addition, youth will be held financially responsible for any damage to private or public property. Further, the participant (or parent/guardian) promises to hold harmless the sponsoring organization and its representatives for any injury related to the activity.

If a dispute over this agreement or any claim for damages arises, the participant (or parent/guardian) agrees to resolve the matter through a mutually acceptable arbitration process.

Signature: _____ Date: _____

(Participant or parent/guardian if a minor)