



Youth Release Form

I, _____, hereby release Calvary Chapel of Fredericksburg, and any persons directly involved with leading any functions sponsored by same, from any liability for my son/daughter, _____, on the trip to _____, and also give permission for them to transport my child to and from above destination. I also give permission for the adult chaperone to authorize any emergency medical care that my child may need while on this trip. My understanding is that they will make every effort to contact me before this care is given, and that this effort will continue until I am reached.

Parent/Guardian Signature: _____

Phone Number: _____ Cell Number: _____

Email Address: _____

Allergies: _____

Blood Type: _____ Medications: _____

Primary Care Physician: _____

Physician Phone Number: _____

- Yes, I give permission**
- No, I do not give permission** for the church to use photos of my student on the church's youth webpage.
- Yes, I am willing to help with transportation**
- Yes, I am willing to lend my vehicle for transportation**



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