

# Medical Release & Permission Form

## Hershey Park Day: July 30<sup>th</sup> 9:00am-10:00pm

On July 30<sup>th</sup> we will depart Littlestown Chapel @ 9am, returning around 10pm. The cost of admission is \$39.00. **This form and money is due on Wed, July 24<sup>th</sup>**. Make sure to bring extra money for food, snack or other activities if desired. We will have a cooler to bring a packed lunch for those interested.

### Please print in ink

Name: \_\_\_\_\_ Age \_\_\_\_\_ Birthday \_\_\_\_\_  
LAST FIRST MIDDLE

Year in school \_\_\_\_\_  Male  Female Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Pager / cell \_\_\_\_\_

Medical insurance company \_\_\_\_\_ Policy # \_\_\_\_\_

Mother's name \_\_\_\_\_ Phone: Home \_\_\_\_\_ Work \_\_\_\_\_

Father's name \_\_\_\_\_ Phone: Home \_\_\_\_\_ Work \_\_\_\_\_

Emergency contact \_\_\_\_\_ Phone: Home \_\_\_\_\_ Work \_\_\_\_\_

Physician \_\_\_\_\_ Office phone \_\_\_\_\_

### For your information, we expect each student to conform to these rules of conduct

- No possession or use of alcohol, drugs, or tobacco
- No fighting, weapons, fireworks, lighters, or explosives
- No offensive or immodest clothing
- Participation with the group is expected
- Respect property
- Respect one another, staff, and adult leaders
- Respect and comply with event schedules

**Students who fail to comply with these expectations may be sent home at their parents' expense.**

\_\_\_\_\_ has my permission to attend this youth activity  
NAME OF STUDENT

This consent form gives permission to seek whatever medical attention is deemed necessary, and releases the Church and its staff of any liability against personal losses of named child.

Parent/guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_