



Trip Release for Bullard FUMC Youth Activities Sep 1, 2017 - Aug 31, 2018

*****Must have one of these forms on file before attending any trip with Bullard FUMC Youth this Year*****

Youth's Name	
Address	
City, State, & Zip	
Home Phone	
Student Cell Phone	
Student E-mail	
D.O.B. / /	
Grade Completed: Circle One	6th 7th 8th 9th 10th 11th 12th // Adult
Parent's Name	
Parents' Contact #	
Emergency Contact # if different	
Parent E-mail	
T-Shirt Size	S M L XL 2X 3X

I give permission for my child, _____ to join
(name of student)

Bullard First United Methodist Church in an offsite activity. I authorize Patrick Foster, or other adult leader, to obtain medical treatment of a licensed physician in the event that it is needed. I understand that I will be notified as soon as possible. I will not hold Bullard First United Methodist Church or supervising adults liable for injuries. I agree that my teenager is to act in an appropriate manner, and will hold my teenager accountable for his/her actions. Youth understand and agree to abide by all the rules for this event or trip. If at anytime these rules are broken, the youth who broke the rule will be sent home at the expense of the youth and his/her parents. By signing below, you give consent for this youth to attend Summer events and trips and that the parent and youth understand the rules and fee associated with the activity. You also give us the rights of your image to be used in photographs and video within the context of this ministry.

Parent/Guardian Signature

Student Signature

Date