

UpStreet Permission Form

Child's Name

I, _____, hereby give permission for my child to participate in the following activity under the supervision of Ridge Church staff and volunteers. I release Ridge Church of any liability.

Activity: Kid Venture

Date: February 6th

Time: 9:45 AM-12:45 PM

Location: Sports Connection (Charlotte, NC)

Emergency Contact:

Name: _____ Home #:(_____)_____

Cell #: (_____)_____

_____ Does your child have any medical conditions or allergies that may be relevant to a physician in the event of an emergency? (Asthma, heart condition, etc.)
YES _____ NO _____ If so, please explain. _____

_____ Does your child have any medical food allergies?
YES _____ NO _____ If so, please explain. _____

Ridge Church uses video clips from events to highlight, promote or celebrate what is happening in our ministry. These videos are only used by Ridge Church and may be used on our website. Videos will not be sold or distributed. By signing below you are giving Ridge Church permission to use any footage from this event.

Parent's signature: _____ Date: _____