

FIRST PRESBYTERIAN CHURCH PARENTAL CONSENT ACTIVITY FORM

Youth and Parents please read and sign this form. One form will be needed for each youth for each church sponsored off-site or on-site overnight activity.

(Please Print)

Activity Name _____

Activity date _____

Youth's Name _____ Youth's age _____

Address _____ City/state _____ Zip _____

Are there any changes from the church-held Medical Release form? Please explain:

ACTIVITY RULES

- I will remember that I am a witness to others for Christ and I will pay attention to how my words and actions affect my witness.
- I promise to respect myself, my peers, leaders and those we come into contact with.
- I promise not to bring or use any weapons, alcohol or drugs. I know I will be sent home immediately if do.
- If I will be taking any prescription medications, I will let the leader know and won't share them.
- I will not go into the room of a member of the opposite sex. If I am allowed to (the leaders allow it) then I will leave the door open and the lights on at all times.
- I will listen to personal CD players only during the travel time and at night.
- I agree to follow any further rules given by the leaders.

I _____ (youth) agree to the above rules and will follow them. I know if I break any of these rules I may be sent home at the expense of my parents and face further disciplinary action.

Signature of Youth

Date

Signature of Parent/Guardian

Date