

First Presbyterian Church of Santa Ana
Permission Slip

Please fill out one form per child

Date: _____, 2015

I hereby request that _____
Be permitted to attend _____ with **First Presbyterian Church Santa Ana**
from on _____, 2015.

Realizing that the church has insurance to cover this outing, I, nevertheless, agree to relieve the FPCSA, The Presbytery of Los Ranchos, and any of the officers, agents, volunteers or employees from any liability in connection with this request so long as due diligence is exercised.

Youth Name: _____

Address _____

City _____ Zip _____

Phone Number _____ Birth Date _____

Parent's/Guardian's Names _____

Parent/ Guardian's Signature _____

Home Church _____

First Presbyterian Church of Santa Ana
Emergency Authorization and Medical Release

Please fill out one form per child

I request that my child, _____
be permitted to attend the _____ with **FPCSA** from _____ to
_____, 2015. He/She is in good physical condition. Should any illness or
accident occur to him/her, I will not hold First Presbyterian Church of Santa Ana, its
officers or leaders liable for medical aid rendered and will reimburse First Presbyterian
Church of Santa Ana for medical expenses and other expenses incurred in the care of my
child.

_____ My child may receive first aid. He/She MAY receive medical attention by a
licensed physician. He/She MAY be admitted to a hospital in case of emergency.
Parents will be contacted immediately, if possible.

_____ He/She MAY NOT receive first aid, medical attention or be admitted to a
hospital without my knowledge.

Doctor (name and address) _____

Doctor's Phone _____ Date of last tetanus shot _____

Any special medical conditions or allergies _____

Alternate contact in case of emergency _____

Emergency Phone Number _____

Parent's/Legal Guardian's Signature _____

Date _____