

North Suburban Evangelical Free Church Kid Konnection Permission Slip

_____ has my permission to attend the
(minor's name)
_____ on _____
sponsored by North Suburban.

I agree to refrain from holding North Suburban Evangelical Free Church or any of the sponsors present during an event liable for any accident or mishap that might occur during an event. I also understand that, in the event that medical treatment is required, every effort will be made to contact me. However, if I cannot be reached, I give permission to the staff or sponsor to secure the services of a licensed physician to provide the care necessary, including anesthesia, for my child's well-being.

_____ (signature of parent or guardian) _____ (date)

Parent's Name _____
Phone # _____ Work # _____
Insurance Company _____ Policy # _____

Please list any allergies, medications being taken, medical problems, or other pertinent information.