

**HAYSHIRE UCC**  
**Child and Youth Special Activity Permission**

I hereby give my permission for my child(ren)/youth

1. \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_
2. \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_
3. \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_

to participate in the following event:

Event: \_\_\_\_\_

Location: \_\_\_\_\_

Being led by: \_\_\_\_\_

Leaving from: \_\_\_\_\_

Date: \_\_\_\_\_ Times: \_\_\_\_\_

I understand that the group will be:  walking  driving

These approved transporters will drive: \_\_\_\_\_

\_\_\_\_ Yes, I am willing to drive \_\_\_\_ Yes, I am willing to chaperone

I understand that a copy of my child(ren)/youth's medical information and emergency contacts will be taken along in the event of an emergency. I have notified the church of any changes to this information prior to this event.

\_\_\_\_\_  
(signature of parent/guardian) Date: \_\_\_\_\_