

**St. Lucas United Church of Christ  
Middle School and High School  
Permission Form**

Name of Event/Activity: \_\_\_\_\_

Date of Event/Activity: \_\_\_\_\_

Dear St. Lucas United Church of Christ Parent,

**Your son/daughter *must* have this form completed in order to participate in the above named event.**

(Youth's Name) \_\_\_\_\_  
has my permission to attend and participate fully in the above named activity.

I am acknowledge **that I am fully responsible** for my child's conduct while participating in this event. I release all chaperones from any liability for injuries sustained by my son/daughter due to circumstances over which said chaperones cannot reasonably be expected to have any control. Additionally, I release St. Lucas United Church of Christ from any and all liability for injuries sustained by my child while participating in this activity and/or while being transported to/from the event venue.

I will instruct & discuss with my son/daughter the necessary rules of safety, as well as good Christian conduct.

**Does your child have a completed Health Form on file with St. Lucas Youth Ministries?**

**YES:** \_\_\_\_\_ **NO:** \_\_\_\_\_ (if no, please complete an Emergency Treatment Release form)

**If YES, are there any changes or updates to the Emergency Treatment Release form for which we should be aware? Please list:**

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Parent/Guardian Phone Number During Event

Date Signed: \_\_\_\_\_

**REACH • FUN • LEARN • SERVE • PRAISE!**