

2012 NEW YORK CITY FAITH ADVENTURE
PARENTAL RELEASE FORM

I, the undersigned parent or guardian of _____ hereby state that I have read and agree to the following:

1. I give permission for _____ to participate in the Sunne Lutheran Youth trip to New York City, June 21-29, 2012.

2. In the event the above named minor should be admitted to any hospital or be in need of any medical treatment, I authorize Pastor Paul Schauer or any other adult counselor from Sunne Lutheran Church to consent to and authorize the administration and performance of all treatment that may be considered necessary in the judgement of attending physicians. This authorization shall continue for such time as the above named minor is participating in the Sunne Lutheran Youth New York City Faith Adventure.

3. In the event that the above named person should
a. use, possess, transport or obtain alcoholic beverages or any illegal drugs
b. commit any crime or get in trouble with the law
c. engage in sexual activities
d. be judged to be acting in a manner not in the best interest of the group

during the Sunne Lutheran Youth trip to New York City, I agree to pay all transportation costs to return the above named person to Wilton, North Dakota. I agree that the minor shall be transported by a commercial transport service at the soonest time that travel arrangements can be made. Such transportation will not take place without notification of parent or guardian.

Signature of parent/guardian

Date

Where parent(s) may be reached in case of emergency:

Home phone: _____

Work phone: _____

Cell phone: _____

Name of Youth _____

Address _____

e-mail address _____

Phone _____

Birthdate _____