



**Calvary United Methodist Church  
PARENT/GUARDIAN PERMISSION FORM**

This form gives permission for my child to participate in the activity/event listed below:

Activity/Event \_\_\_\_\_

Location \_\_\_\_\_

Transportation \_\_\_\_\_

Date(s) \_\_\_\_\_

Time From: \_\_\_\_\_ To: \_\_\_\_\_

Designated adult not participating in activity/event who will handle emergency information:

Name \_\_\_\_\_ Phone # \_\_\_\_\_

*Please return this portion:*

.....  
Name of child \_\_\_\_\_

Activity/Event \_\_\_\_\_

Event Coordinator \_\_\_\_\_

Emergency contact \_\_\_\_\_ Phone # \_\_\_\_\_

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

Print Name \_\_\_\_\_ Date \_\_\_\_\_