

Nesconset Christian Church

247 Smithtown Blvd.
Nesconset, NY 11767

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Permission slip

Name of Student _____
Students date of Birth _____
Names of parents or Legal Guardian _____
Street Address _____
City, State, Zip _____
Home phone number _____
Work phone number _____
Cell Phone Number _____

In event of an emergency, we cannot be reached at the above numbers, please call one of the following people.

Name _____ Phone number _____
Name _____ Phone number _____

Additional Medical Information

Insurance Company and Number _____
Allergies, Conditions, Medications? _____

For the above named minor, a legal guardian must fill out the following,

I hereby give permission for the above named young person to participate in off campus outing and activities sponsored by NCC.

I hereby release NCC, its staff, and youth sponsors from responsibility and liability for any injury or illness that the above named young person, who is under my legal guardianship, may sustain during any youth activity sponsored by NCC.

Additionally, I authorize an adult youth sponsor of any NCC youth sponsored activity as an agent for me to consent to any X-ray, examination, medical/dental/surgical diagnosis, treatment/hospital care advised and supervised by a physician/surgeon/dentist licensed to practice under the laws of the stated in which services are rendered, either at a doctor's office or at a hospital, in the event that I am not able to make those decisions for myself.

I hereby agree that the expiration date of this contract is six years from the signing date of the legal guardian.

(Signature of Legal Guardian)

(Date of Signature)

