

My son/daughter _____ has my permission to participate in the following activity: Purefect Conference April 30- May 1st, 2021. .In case of injury or illness, I authorize any adult leader or pastor to render emergency first aid or seek all necessary medical attention for my son/daughter. In such case, I understand that I will be notified as soon as possible. I agree to hold harmless and blameless the leadership (including all members, and any adults participating in or providing assistance to this activity) and The Feed Store Family Training Center, in the event of any injury or illness resulting from participation or transportation in this activity. I waive all rights to any civil action against the above mentioned parties. If my son/daughter has had any serious illness or injury, or medical treatment over approximately the last 6 weeks of which I will notify the appropriate youth leaders for clearance prior to participation.

For questions feel free to call Garret Day @ 719-251-4399.

Printed Name of Parent or Guardian

Signature

Date

Phone number: