Easthaven Baptist Church PERMISSION SLIP FOR

Get Real Middle School Youth Conference 2017

I,, the parent of		age	give my
permission for my Middle School son/daughte	er to participate in the 🤇	et Real	Middle School
Youth Conference on November 10 th 10 th @ 3:45pm, and return to the church at 4: spending the night in the Red Lion 700 West included with the room, (hotel # (406)728-330 Emergency contact numbers: Joey Gardner –	00pm on Saturday the Broadway, in Missoula. 00). · 250-2428	11 th . Cost is A continent	s \$50, we will be tall breakfast is
I understand that there are potential risks in the its leaders responsible for any potential harm			n Baptist Church and
I give my permission to Easthaven Baptist Ch procedures for my child, which may be require			y necessary medical
Parents Name:	Signature:		_
Phone number where you can be reached: If you can't be reached, we should call:	at (<u>)</u>		
Youth's name: Medical insurance carrier: Insurance number: Preferred physician: Medication being taken: Allergies:			
Pictures taken of your son/daughter during this event, (Facebook, Instagram, etc.)	may be used for promotion of	on EBC social ı	media sites, ie:
Yes, I Grant Permission	No, I Do Not Grant Pern	nission	

WHAT YOU NEED

Money for dinner on Friday and lunch on Saturday Permission Slips (2) Bible Paper and Pen Toiletries