First Baptist Church 501 West Fifth Street Winston-Salem, NC 27101 722-2558

Grant of Permission

To:	(FBC Contact)	
The u	ndersigned, as natural	parent or legal guardian, does hereby consent and grant permission
for		to participate in the church activity described below:
	(name of child/youth)	
	Date of Event:	
	Destination:	
	Purpose:	
	Type of Transporta	ion: Church buses and private cars
	Activity Supervised	by: FBC Staff and Volunteers
encou	intered in attending cl	the child/youth may be exposed to more or greater hazard than may be urch. The undersigned shall warn the child of such hazards and caution nary care so as not to contribute to injury to him/herself or other persons.
guard diagn	ian, I hereby give per	ncy, after every reasonable effort has been made to contact a parent or mission to the physician selected by the FBC Contact to secure necessary the child(ren) herein described. I have not been given a guarantee of the atment.
above		m must be signed and returned to the FBC Contact Person in order for the pate and that the Church and leaders are released from any liability in case of
	(Date)	(Signature of Parent or Legal Guardian)
Phone	2	Cell Phone
Paren	t/Guardian's location o	uring the activity:

(S:/Forms in Use/Permission Forms/Grant of Permission – Medical Waiver)