

United First Parish Church 1306 Hancock Street, Quincy, MA 02169

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Children and Youth Ministry
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PARENT/GUARDIAN'S PERMISSION AND MEDICAL RELEASE FORM

(child/ren's name)

_____ has my permission to attend field trips for church school events with United First Parish Church teachers/advisors September 2011-June 2012. I understand that when my child/youth is driven in a motor vehicle there will be a safety belt for my child. In case of an emergency, I hereby authorize the adult chaperone's to give permission for treatment in the case that my child would need medical care. In case of an emergency I can be reached at _____ (cell phone) _____ (home phone)

Health Problems _____

Allergies _____

Child's Health Insurance carrier: _____

Insurance number: _____

Print name and include Signature of Parent/Guardian

Date _____

Created September 2011

LAST NAME_____

family
Registration
Packet

for children registered in the
Religious Exploration Program

United First Parish Church (UFPC)
Unitarian Universalist

2011-2012