

# St. Mark's Lutheran Church of Olathe, Kansas, Inc.

## PARENTIAL PERMISSION FOR OFF-SITE EVENTS AND TRANSPORTATION TO AND FROM OFF-SITE EVENTS

In order for your child to be allowed to participate, this form must be completed & delivered to Event Leader on or by \_\_\_\_\_, 20\_\_.

**Please Type or Print Legibly (Black or Blue Ink)**

Event: \_\_\_\_\_

Location: \_\_\_\_\_

Date(s): \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

<u>Child's Name</u>	<u>Child's Age</u>	<u>Weight and Height *</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

\* If my child is less than 14 years old, and weighs less than 80 lbs., or is less than 4ft. 9 inches, I will provide a passenger restraining seat that complies with Kansas law to the driver of this event to use for my child.

Parent's Name: \_\_\_\_\_

Parent's Address: \_\_\_\_\_  
Street City State Zip

Phone; Cell: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_  
(Circle best phone number to contact during this event)

The caregiver listed below will transport my child to the event gathering place and pick up the child at the above stated time, if I cannot.

Caregiver's Name: \_\_\_\_\_

Caregiver's Address: \_\_\_\_\_  
Street City State Zip

Phone: Cell: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_  
(Circle best phone number to contact during this event)

### In the event of an emergency and the parent cannot be reached, please contact:

Contact Name: \_\_\_\_\_

Contact Address: \_\_\_\_\_  
Street City State Zip

Phone: Cell: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_  
(Circle best phone number to contact during this event)

I am the parent or legal guardian of the above-named child or youth. I hereby consent and give my permission for my named child to participate in the event and to be transported to and from that event by a driver selected by St. Mark's. I further agree to pick up each child at the time the event is published to end or to designate a caregiver to pick up my child prior to delivering the child to the event.

Date: \_\_\_\_\_  
(Signature of Parent/Guardian)

Office Use Only