

MARY OUR QUEEN
Middle School Youth Ministry
PERMISSION SLIP

We will be traveling on several trips throughout the year for our Middle School Youth Ministry program. Please fill one of these out for the year so that we have it on file for you.

Mary Our Queen Permission Form

Name of Youth _____
Address _____
Home Phone _____
Name of Emergency Contact during trip _____
Phone of Emergency Contact during trip _____
Medical problems, allergies or medication _____
Insurance Company _____
Policy Number _____
Policy Carrier _____

I, the undersigned, grant permission for the above child to participate in the Mary Our Middle School Youth Ministry trip as described in the newsletter. In the event that the parents or emergency contact cannot be reached, the volunteers are authorized to take whatever action is deemed necessary, in their judgment, including transportation by ambulance, for the health of the above named child. I will not hold Mary Our Queen Church, the volunteers or the Archdiocese of Hartford, financially responsible for the emergency care/transport of the above named child.

Parent's signature: _____ date: _____