

# LANDMARK BAPTIST CHURCH

1600 Uta Avenue, Grand Junction, Colorado 81501  
970.257.1047

## JUNIOR/YOUTH PERMISSION FORM

### YOUTH'S INFORMATION

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

Address: \_\_\_\_\_

D/O/B: \_\_\_\_\_

### PARENT'S INFORMATION

Father's Name: \_\_\_\_\_

Address if different than son/daughters: \_\_\_\_\_

Home Phone #: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Address if different than son/daughters: \_\_\_\_\_

Home Phone #: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_

### EMERGENCY

Doctor's Name/Office: \_\_\_\_\_

Doctor's Phone #: \_\_\_\_\_

Emergency contact other than parent  
or guardian: \_\_\_\_\_

Relationship to son/daughter: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_

### MEDICATIONS

List all medications your son/daughter  
takes on a regular basis

The church or sponsor will not be responsible if your son/daughter takes incorrect doses of his/her  
needed medications. We recommend that your son/daughter only brings that which is necessary.

### MEDICAL INFORMATION

Does your son/daughter have an allergic reaction to penicillin?      YES      NO

Does your son/daughter have an allergic reaction to other medicines?      YES      NO

Please list the medicines your son/daughter has allergic reactions to:

List any other allergies your son/daughter has:

I give my son/daughter, that's listed above, permission to participate with the Landmark Baptist Church junior and youth activities. In case of an accident, and I cannot be reached, I give my parental permission for the sponsor in charge to have any necessary medical treatment administered to my son/daughter, and I will not hold the church or sponsor liable. I understand that my son/daughter may be transported by a bus, shuttle and/or church related vehicle. I also acknowledge that I have received and read a copy of both the Comportment Guidelines and the Fundraising Guidelines and accept them as written.

\_\_\_\_\_  
Father's (or guardian's) Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mother's (or guardian's) Signature

\_\_\_\_\_  
Date