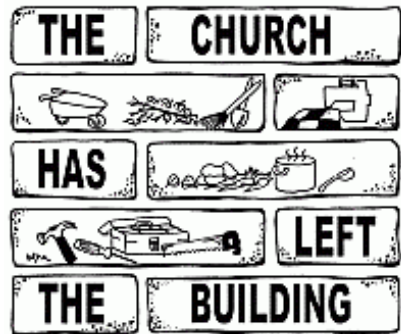


Sunday, September 23, 2007



Park Terrace Community
United Methodist Church

PARENT/GUARDIAN PERMISSION FORM
(FOR PERSONS UNDER AGE 18)



(PLEASE PRINT)

Name of Person under the age of 18: _____

Date of Birth: ____/____/____ Age: ____

Contact Person in case of emergency: _____

Contact Person's phone number: _____
HOME CELL

Please list any medical conditions and/or allergies that we should be aware of:

Statement of Permission

I, as legal guardian of the above-name volunteer, do hereby give permission for him/her to participate in Park Terrace's "The Church Has Left the Building" service project.

This permission also allows the volunteer to be transported to and from a project area if necessary.

Further, I give my permission for my child to receive any medical care deemed necessary.

Physician's Name and Phone Number: _____

Hospital Preference: _____

Parent/Guardian Name (PLEASE PRINT): _____

Parent/Guardian Signature: _____ DATE: _____

(NOTE: This form MUST BE COMPLETED for all persons under the age of 18.)