

I give my permission for my son/daughter (Name) to attend this activity with Canyon Ridge Baptist Church (CRBC).In the event of an emergency I give my permission for a representative of CRBC to sign any medical papers necessary for the immediate medical attention of my child, until I can be contacted. I agree NOT to hold CRBC and its representatives liable for any injuries incurred during the activity, excepting damage or injury solely caused by willful misconduct.If my child becomes a disciplinary problem, I agree to provide transportation from the activity location and assume responsibility for any monetary damages they have caused.

Parent's Signature :
Parent's Printed Name:
Date:

Emergency Phone:_____

Dear Parent, thank you so much for entrusting us with your child for today's activity. If you have never attended at Canyon Ridge, we would love for you to join us during our next service. Visit our website for more information.

www.canyonridgesandiego.com