**Permission and Release Form**

**The Net Fellowship Church**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (parent or guardian print full name), hereby give permission for my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (print child’s full name) to travel with the Net Fellowship and/or staff, leadership, and volunteers, by personal and/or commercial rental vehicles to and from the event, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (insert event name) located in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (insert city and state). This includes to or from The Net church, or to and from the child’s residence as needed. In the event of an emergency, and when a parent or guardian cannot be reached in an appropriate time frame, I grant permission for emergency medical treatment to be administered to my child. Additionally, I release the church and the church staff, leadership, and volunteers from any liability claim regarding delays, accidents or other adverse incidents during the trip that is taking place on \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date).

Signed:

Parent or guardian

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency contact number