

# sr. high connect

## AKRON BAPTIST TEMPLE

2324 Manchester Road, Akron, OH 44314  
(330) 745-8824

### ACTIVITY PERMISSION FORM

**Dare 2 Share Youth Conference**

**Department/Group sponsoring the activity: Senior High CONNECT**

**Date:** Feb 5 & 6, 2010

**Place:** Columbus, OH - Columbus Convention Center

**Time of departure from church:** 3pm Feb. 5, 2010

**Time beginning if activity is at church:** N/A

**Approximate time of return to church:** 11:00pm on Feb. 6

**Time ending if activity is at church:** N/A

**Contact person responsible for this activity:** Jason Knight

**Contact phone number:** 330-618-7212

**Cost:** \$75.00

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Tear off and return this portion of the form with your child. Keep top portion for your information.

\_\_\_\_\_ has my permission to attend with

(Child's Name)

**CONNECT for the following activity: Dare 2 Share Youth Conference**

**on (date): February 5 & 6, 2010**

*check this box to verify that the participant above has a current, signed medical release form on file at the Akron Baptist Temple. **Note: Child may not attend if the medical form is not on file.***

*check this box to give the participant above permission to leave the activity before it is schedule to end, either driving themselves, or leaving with another person. Name of Person they can leave event with:*

\_\_\_\_\_  
(Person's Name)

*I understand the arrangements and also believe that necessary precautions and plans for the care and supervision of my child during the trip/activity will be taken. Beyond this, we will not hold the Akron Baptist Temple or those supervising the trip/activity responsible.*

Parent/Guardian

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Number where you can be reached during the hours of this activity:

Phone: \_\_\_\_\_

Mobile: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_