

**Old Bethel Baptist Church**  
**4 Day/3 Night trip to Nixa River, MO & Eureka Springs, AR**  
**Dates of 7/9/18 – 7/12/18**  
**Release Form**

Student's Name \_\_\_\_\_ Age \_\_\_\_\_ D.O.B. \_\_\_\_\_

Parents' Names (Father) \_\_\_\_\_ (Mother) \_\_\_\_\_

Parents' Phone# \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Any Medication \_\_\_\_\_

Medical Info \_\_\_\_\_

**PLEASE READ CAREFULLY!**

This form must be read and signed by both parents (or guardians) before the above named child will be allowed to attend

Although Old Bethel Baptist and workers are watching and working for the safety and well being of all students, Old Bethel release and absolvance from all liability of sickness, accident, injury, or death is required by every parent (or guardian) and student.

**ALL STUDENTS MUST HAVE THIS FORM SIGNED!**

I hereby give permission for my child to take part in the trip's activities (unless otherwise indicated), and absolve Old Bethel Baptist and workers from liability to me or my child because of any injury received while attending this Trip. In case of any accident or serious illness, I hereby authorize Old Bethel Baptist and workers to call upon a physician of their choice and to follow his or her instructions. If emergency treatment or hospitalization is required, I request Old Bethel Baptist to notify me.

**SIGNATURE OF BOTH PARENTS (OR GUARDIANS) (Indicates the above paragraph has been read and agreed to)**

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_  
(parent or guardian)

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_  
(parent or guardian)

**Emergency Number ( \_\_\_\_\_ ) ( \_\_\_\_\_ )**

Only one child may be registered per form.