

# Adult Temporary Permission Form

## Messiah Lutheran Church Youth Ministry

Date \_\_\_\_\_

Name: \_\_\_\_\_ is serving as a chaperone for

Event: \_\_\_\_\_

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

I will not hold anyone involved liable.

In case of an emergency, Messiah Staff, or a Messiah youth counselor has my permission to seek medical care for me.

In case of an emergency, a family member of mine can be reached at

\_\_\_\_\_.

*I am allergic to:* \_\_\_\_\_.

*My insurance company is:* \_\_\_\_\_.

*My policy number is:* \_\_\_\_\_.

*Printed Name:* \_\_\_\_\_.

*Signature:* \_\_\_\_\_.