



**2017 - 2018**  
**Permission Slip & Medical Release Form**  
 Claremont Bible Chapel - 432 W. Harrison St. - Claremont, CA 91711

**1. Child's Name:** \_\_\_\_\_  
 Birthdate: (Month/Day/Year) \_\_\_\_\_ Grade: \_\_\_\_\_ Boy \_\_\_ Girl \_\_\_  
 Medical / Allergies/ other information: \_\_\_\_\_

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**2. Child's Name:** \_\_\_\_\_  
 Birthdate: (Month/Day/Year) \_\_\_\_\_ Grade: \_\_\_\_\_ Boy \_\_\_ Girl \_\_\_  
 Medical / Allergies/ other information: \_\_\_\_\_

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**3. Child's Name:** \_\_\_\_\_  
 Birthdate: (Month/Day/Year) \_\_\_\_\_ Grade: \_\_\_\_\_ Boy \_\_\_ Girl \_\_\_  
 Medical / Allergies/ other information: \_\_\_\_\_

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**4. Child's Name:** \_\_\_\_\_  
 Birthdate: (Month/Day/Year) \_\_\_\_\_ Grade: \_\_\_\_\_ Boy \_\_\_ Girl \_\_\_  
 Medical / Allergies/ other information: \_\_\_\_\_

**Family Information:**  
 Father's/Guardian's Name: \_\_\_\_\_ Cell #: \_\_\_\_\_  
 Mother's/Guardian's Name: \_\_\_\_\_ Cell #: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Email address: \_\_\_\_\_ Home #: \_\_\_\_\_  
 Where does your child regularly attend church? \_\_\_\_\_  
 Back-up emergency name: \_\_\_\_\_ Back-up phone #: \_\_\_\_\_

**Consent and Waiver:**  
 As legal guardian, I authorize my child to participate in AWANA, and I authorize church personnel to transport my child to and from different AWANA meetings and events as needed. My signature indicates that I release Claremont Bible Chapel, staff and volunteers from any actions, claims, loss or injury that may occur.  
 I authorize church personnel to transport my child to a physician's office and/or emergency room for treatment in the event that emergency medical treatment is needed. Further, I authorize the physician and hospital staff to treat my child as they deem necessary in an emergency situation. This authority is granted only after a reasonable attempt has been made to reach me by phone at the numbers listed above.  
 I also understand that photos or videos which may include my child (taken during activities and events) may be placed on Claremont Bible Chapel's website ([www.claremontbiblechapel.com](http://www.claremontbiblechapel.com)) to allow both parents and children to see past activities and events. **Under no circumstance will anyone's name or personal information be uploaded to the website.** Please check the box below only if you DO NOT wish to have photos/videos including your child uploaded.  I DO NOT give permission to use photos/videos of my child on the church's website.

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*Parent / Guardian Signature* \_\_\_\_\_ *Date* \_\_\_\_\_ *Print Parent / Guardian Name* \_\_\_\_\_