

# ***TEEN WEEK 2018!***

## **INFO & PERMISSION FORM**

Student's Name: \_\_\_\_\_ Birth date: \_\_\_\_\_ Grade: \_\_\_\_\_  
Address: \_\_\_\_\_ Home Church: \_\_\_\_\_  
Helpful info, allergies, medications, etc.: \_\_\_\_\_  
Preferred communication:  Email (address: \_\_\_\_\_)  
 Facebook (profile name: \_\_\_\_\_)  
 Instagram (username: \_\_\_\_\_)

### **Teen Week Info (\$15 per day or \$40 for the whole week)**

- 6/18 (Mon.) – **Beach Trip** (Ocean City: **8am-9pm**) *Note: bring lunch and money for dinner*
- 6/20 (Wed.) – **Amusement Park Trip** (Dorney Park: **12pm-7:30pm**) *Note: bring money to buy dinner*
- 6/22 (Fri.) – **Hiking Trip** (Hickory Run State Park: **8am-3:30pm**) *Note: bring water/bug spray.*

### **Students' TO DO:**

1. Please check off above all the events you plan on attending.
2. Please turn in this entire form and money (put in envelope on back) to Pastor Joel by **Wed. June 13, 2018**. Thanks!

(Name of Student) \_\_\_\_\_ has my permission to participate in **Teen Week!** which will take place **June 18, 20, and 22**. Knowing that *Bethany Bible Fellowship Church* will take utmost care of my student's safety, I understand that accidents do occur and that in such situations immediate steps must be taken to secure my student's health. I hereby authorize *Bethany Bible Fellowship Church* to seek medical attention for my student should an emergency arise, understanding that I will be contacted as soon as possible. Failure to reach me shall not prevent an application of immediate, necessary medical treatment, not excluding injection, anesthesia, or surgery. I further agree that *Bethany Bible Fellowship Church* shall not be held liable in the event of accident or injury to my student. Bearing this in mind, I understand and agree that *Bethany Bible Fellowship Church* disclaims any and all liability in the unlikely event of injuries sustained during this event.

\*PRINTED\* name of Parent/Guardian: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ ID Number: \_\_\_\_\_

### **Emergency Contact Information:**

\*PRINTED\* Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Relationship: \_\_\_\_\_



**BETHANY**  
BIBLE FELLOWSHIP CHURCH