

**Parental Consent Form**

(Student name)

**Has my consent to be with:**  
Skybacher Ministries Inc.

**For the purpose of participating in the following event:**

Broomball @ Brady's Run Ice Arena  
Sat., Dec. 8, 10:30pm-1:30am

**It is understood that every precaution will be taken for the safety and well-being of my child, but in the event of accident or sickness, Skybacher Ministries, its staff and its volunteers are hereby released from any liability.**

**Signature:**

**Date:**

**Printed Name:**

**Phone #:**

**Parental Consent Form**

(Student name)

**Has my consent to be with:**  
Skybacher Ministries Inc.

**For the purpose of participating in the following event:**

Broomball @ Brady's Run Ice Arena  
Sat., Dec. 8, 10:30pm-1:30am

**It is understood that every precaution will be taken for the safety and well-being of my child, but in the event of accident or sickness, Skybacher Ministries, its staff and its volunteers are hereby released from any liability.**

**Signature:**

**Date:**

**Printed Name:**

**Phone #:**

**Parental Consent Form**

(Student name)

**Has my consent to be with:**  
Skybacher Ministries Inc.

**For the purpose of participating in the following event:**

Broomball @ Brady's Run Ice Arena  
Sat., Dec. 8, 10:30pm-1:30am

**It is understood that every precaution will be taken for the safety and well-being of my child, but in the event of accident or sickness, Skybacher Ministries, its staff and its volunteers are hereby released from any liability.**

**Signature:**

**Date:**

**Printed Name:**

**Phone #:**

**Parental Consent Form**

(Student name)

**Has my consent to be with:**  
Skybacher Ministries Inc.

**For the purpose of participating in the following event:**

Broomball @ Brady's Run Ice Arena  
Sat., Dec. 8, 10:30pm-1:30am

**It is understood that every precaution will be taken for the safety and well-being of my child, but in the event of accident or sickness, Skybacher Ministries, its staff and its volunteers are hereby released from any liability.**

**Signature:**

**Date:**

**Printed Name:**

**Phone #:**