

Parental Consent Form

(Student name)

Has my consent to be with:

(Name of adult workers)

For the purpose of participating in the following event:

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 Number:

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