

**Providence United Methodist Church  
Youth Permission Form**

I give my permission for my child to participate in \_\_\_\_\_  
(Event Name)  
on \_\_\_\_\_, 200\_\_ during the previously listed scheduled hours of  
*Date(s)*  
this event. (Event dates and times can be found on the Providence Youth Website).

By signing below, I understand that my child is participating on a voluntary basis and I hereby release Providence UMC, its affiliates and all those acting on behalf of Providence UMC with all liability associated with said event. I understand that my child will be expected to follow all rules and I agree to the consequences as listed in the **Expectations** handout, which I have received. In addition, my child understands the following and agrees to these rules as well:

1. No tobacco, alcohol or drugs permitted.
2. No leaving the group at any time without permission.
3. Adults are in charge.
4. Observe the rules of the facility.
5. I will be on my best behavior.

Participant's Name: \_\_\_\_\_

Participant's Signature: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

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