

TRINITY LUTHERAN CHURCH YOUTH ACTIVITY

Permission form

****Please fill out both sides**

YOUTH

NAME: _____

CONTACT PHONE# _____ Birthday _____

ADDRESS: _____

SCHOOL: _____ GRADE _____

DATE: Sunday, September 29, 2024

TIME: 10:45am - 4:00pm

WHAT: Sturgeon Fest (and release) and Harbor Fest

WHERE: **Milwaukee's Harbor District**
600 E. Greenfield Ave.

COST: \$15.00 (to sponsor and release a sturgeon), Additional money if desired for food truck lunch/snacks (optional)

DEADLINE: Trinity Permission Slips and \$15.00 must be turned in by Sunday, September 22nd.

PARENT/GUARDIAN NAME: _____

HOME #: _____ WORK #: _____

*As parent or guardian, I give permission for my son/daughter to participate in the Youth Group activity associated with Trinity Lutheran Church described above. I do understand that this event will be chaperoned by volunteers and/or a church staff member. I will arrange for my child to have safe transportation home after the event ends. In the event that I cannot be reached in an emergency, I hereby give my permission to the physician or medical facility selected by my child's advisor and/or group leader to secure proper treatment for my child as named above. *

Parent Signature _____ Date _____

2nd Contact Person _____ Phone # _____

Physician to contact if possible in an emergency: _____

Special needs, allergies of which we should be aware? _____

YOUTH COVENANT

In order to participate together in Christian community I commit myself to follow these guidelines:

1)..to behave in a manner consistent with our Christian faith, refraining from foul language, disruptive behavior and excessive rowdiness. I will treat all peers and adult volunteers with respect and kindness.

2)..I understand that this is an alcohol and drug free activity and I will not bring alcoholic beverages or any type of illegal substances to any church associated activity.

3)..I will respect the property of Sturgeon and Harbor Fests and the adults driving and accompanying me.

4)..I promise to abide by the schedule, and understand that failure to conduct myself in a way that is in agreement with this covenant will result in having a parent contacted to come pick me up and take me home immediately.

Youth signature _____

PARENT:

* _____ I would be willing to help supervise at this activity.

* _____ I would be willing to drive youth to and from this activity.

* My child has read the covenant and understands the guidelines and consequences. If they cannot keep this covenant I realize that I will be required to transport them back home.

Parent signature _____