

Faith Bible Fellowship
Located at 14225 W. Kluane Dr, Big Lake AK
892-8545

Parent/Guardian Consent Form

Participant: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: Home: _____ Work: _____ Cell: _____

Age: _____ Alternate Contact: _____ Phone: _____

List participant's known allergies, illnesses, or other health conditions. _____

Medications: _____

Participant's doctor or health care provider: _____
Phone: _____

We, the undersigned parents/guardians of the above named minor, grant permission for him/her to participate in **FBF Youth Group Cereal Bowl/Lock-in: Friday, November 12, 2021 to Saturday, November 13, 2021 from 5:30 p.m. - 8:00 a.m.**

We authorize transportation by Faith Bible Fellowship (FBF).

We have been advised of the nature and extent of the activities that may take place and represent to FBF that the participant is physically and mentally able to participate in those activities.

If we are not personally present at these activities in which the participant is to participate, so as to be consulted in the case of necessity, FBF is authorized on our behalf to arrange for such medical and hospital treatment as FBF may deem advisable for the health and well-being of the participant. We agree to pay all costs of such medical and hospital treatment.

Parent/Guardian Signature:

_____ Date: _____

_____ Date: _____