

**Living Waters Victory Church Fellowship (LWVCF) – Youth-Parent and or Guardian Ride Waiver Form**

2019-2020 Church Transportation Permission Slip and Liability Waiver This form is to be completely, filled out and signed by a parent or legal guardian of a Youth, under the age of 16 years of age, BEFORE the Youth may ride the van or bus or truck.

Please print:

Parent or guardian Name

Address

City \_\_\_\_\_ Prov. \_\_\_\_\_

Postal Code \_\_\_\_\_

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

E-mail address \_\_\_\_\_

Please list all children of your household who have your permission to attend Church, youth programs, church related events, and/or it's Bus or Van or Truck Ride to Designated Drop Off Program(s).

CHILD'S NAME First, Last, Gender, Age, Grade, DOB

\*Do any of the above have food or medication allergies?

**(Please Circle) Yes** \_\_\_ or **No** \_\_\_

\*Do any of the above, have serious medical conditions we need to be aware of?

**(Please Circle) Yes** \_\_\_ or **No** \_\_\_

If you answered **yes** to either of the above questions please list the Child's name, allergies, and medical conditions:

I hereby give my permission for all the children listed above to ride the van or bus or truck, participate in activities, and attend **Living Waters Victory Church (LWVCF)** or any of the church related functions. I understand that my children will be under adult supervision. I further understand that in signing this permission slip, I release and hold harmless **Living Waters Victory Church (LWVCF)** and all other church-related functions. By signing this permission slip, I release and hold harmless its **drivers, trustees, officers, employees, and any volunteers** from any liability, past or future, fully and completely. I authorize the **staff and/or volunteers** to contact emergency medical assistance, as a first line of defence, then, contact me at my above noted number (**please indicate – cell or home phone**) Cell Phone or Home Phone. I understand that my child(ren)'s photo may be taken and used in printed publications, website or social media by **Living Waters Victory Church (LWVCF)**, and that I may contact the church office to revoke this permission.

Parent or legal Guardian signature

\_\_\_\_\_

Date \_\_\_\_\_

\*For **LWVCF Staff use only** (Van or Bus or Truck Licence #) \_\_\_\_\_

Is the above Information Complete?

(**Please circle**) Yes or No

Van or Bus or Truck Driver's Initials \_\_\_\_\_