



INFORMED LETTER OF CONSENT

Student Name(s): _____

Youth Ministry: Skate Night 2020

We will be going skating on Friday, February 28, 2020. Please be ready to depart by 5pm. We will be taking a school bus to Victoria Oval (12030 River Valley Rd NW, Edmonton) and will return at 7pm. Hockey sticks will not be permitted.

Please bring skates and dress appropriately for the weather. Amenities include:

- Drinking fountain
- Filtered water bottle fill-up station
- Lockers
- Skate change area
- Viewing area
- Washrooms

For students attending the Drop In (1-4pm) we will serve a toonie dinner at 4:30pm. (Optional)

Dear Parent:

We are planning an activity as part of our programming that requires your permission prior to participation. We have provided you the details of the activity and request that you complete and sign the permission form. The safety of your child is our primary concern. Precautions will be taken for their wellbeing and protection.

Permission Form and Consent:

Student's Name _____ Date of Birth _____

Address _____

Phone Number _____ Parent's Phone Number _____

Grade _____ Email Address _____

Health Card Number _____

Family Doctor _____ Phone Number _____

Medical/Dietary Restrictions/Allergies (please list)

In case of an emergency, contact:

Name and Phone Number: _____

I hereby consent to the participation of my/our child(ren) in this supervised activity.

While every precaution is taken for the safety and good health, some sports and activities carry with them the inherent risk of personal injury beyond the risks associated with many of the recreational activities at Beulah Alliance Church. I/we understand and accept these risks and agree that by allowing my child to participate in those activities, he/she may be taking part in a recreational activity that presents the potential for personal injury.

I/we, the parents or guardians named below, authorize the Director or one of the Beulah Alliance Church's Personnel to sign a consent for medical treatment and to authorize any physician or hospital to provide medical assessment, treatment or procedures for the participant named above.

I/we, named below, undertake and agree to indemnify and hold blameless Beulah Alliance Church's, its personnel, its Directors and Board from and against any loss, damage or injury suffered by the participant as a result of being part of the activities of Beulah Alliance Church as well as of any medical treatment authorized by the supervising individuals representing the Beulah Alliance Church. This consent and authorization is effective only when participating in or traveling to events of Beulah Alliance Church.

I, the parent or guardian agree to permit the use of photos and / or videos of the applicant in promoting Beulah Youth Ministry. **Circle Y or N**

I have read, understood and agree with above.

Parent / Guardian Signature _____

Printed Name _____ Date _____



Payment Section for Beulah Youth
Youth Ministry Skate Night | Feb 28, 2020

Check Off Registration / Purchases

- \$ 5 Skate Registration Fee
- \$2 Toonie Dinner (4:30pm)

- Cash
- Cheque
- Visa
- Mastercard
- Debit

TOTAL

\$

If you are unable to pay for associated costs due to hardships, please contact youth@beulah.ca

OFFICE USE ONLY

Date received:

Payment received by: _____

Privacy Policy: Beulah Alliance Church considers all personal information as confidential and will not release it to outside parties or organizations. However, by completing (the above payment) you are providing consent for this information to be used within the church for ministry and other church-related activities. When using photos of Beulah events, either on our website or on social media, we try to post photos that would not be considered objectionable, we will gladly remove any photo immediately upon request.