

EXTRA-CURRICULAR ACTIVITY PARENT PERMISSION SLIP

家長簽名(Parent Signature)_____

家長名字正楷(Print)_____

學生姓名(student Name)_____

緊急聯繫人姓名 Emergency contact name: _____

緊急聯繫人電話 Emergency contact phone number: _____ - _____

簽名日期 Date_____

帶領人 Coach/Sponsor Name: _____

活動內容 Activity/Club/Sport: Gospel Camp

開始日期 Start Date: April 10

結束日期 End Date: April 12

I, (Parent Name) _____, give permission for my child
_____ (Student Name) to participate in 2017 David Fellowship

Gospel Camp at CELC (Sport/Club/Activity) during 2017 April 10-12.

我, (父母姓名) _____, 允許我的孩子(學生姓名) _____

參加 2017 年四月十號至十二號的信義會基督堂 2017 大衛團契福音營

Parent: Please complete & return this form to the school office.

My signature evidences that I accept general liability for the participation of my child in the activity, club, or sport identified above and that I agree to indemnify and hold harmless CELC, its teachers, its sponsors, its governing board, and other participating agents, either jointly or severally, from and against any and all claims, injuries, damages, losses, costs, or causes of action that may arise in connection with this activity, club, or sport. If my child is participating in a sports or athletic activity my signature evidences that I understand that each participating student must have a sports physical from a licensed physician on file in the school office before the first practice of the first sport played each school year. This physical is valid for all sports played for this school year only. My signature also evidences that I agree, in the event of a medical emergency, to allow my child to be treated by medical personnel as outlined in my "Emergency Release Form."

Students must have completed and signed permission slip and sports physical (if applicable) before they will be permitted to participate in the above activity, club, or sport. Students without permission slips (and sports physicals, if applicable) will not be allowed to participate. No exceptions will be made.