

PARENT PERMISSION & AGREEMENT FORM

I, the undersigned Parent or Legal Guardian of:

(child) _____

(child) _____

provide the following emergency phone number to Arlington Community Church, for purposes as may be needed, if any, during the period of Peace Child Summer Arts Camp, from August 2 – 6, 2010:

(emergency phone number) _____

(emergency contact person) _____

and inform Arlington Community Church to be alert for the following individual *special needs*, if any (medical, physical or psychological needs), that may interfere with the child's normal participation in the arts groups or classes planned:

(special needs) _____

And I, the parent or legal guardian of the above named registrant(s), hereby give permission for my child(ren) to attend the Peace Child Summer Arts Camp program August 2-6, 2010. I agree that, should my child(ren) commit a serious infraction of rules of ordinary behavior, I will arrange to remove my child from the program at the request of the program director(s) at the earliest possible opportunity. I understand that I am responsible for my child(ren)'s transportation to and from the program under the supervision of an adult over 21 years of age who, if not myself, will provide written permission to transport my child(ren). The young people will be supervised by the team of teaching artists and their adult assistants at all times. Photos of my child(ren) taken during this event may be used for future publicity.

Parent/Legal Guardian: _____ date _____
signature