



ST. VERENA COPTIC ORTHODOX CHURCH

6140 Perrine Ranch Rd
New Port Richey, FL 34655

PARENT CONSENT FORM

Dear parent/guardian: Please complete and return this form, before the start of the trip.

Departure from: St. Verena Coptic Orthodox Church. 6140 Perrine Ranch Rd, New Port Richey, FL 34655

Departure Dates/Times: ____ 6/1/2020 to 7/31/2020 ____

Activities included : ____ Summer Camp Trips ____

I hereby give permission for my son/daughter: _____
to participate in the above described trip and activities.

In consideration of the permission granted, I hereby release the servants, chaperones, drivers, the summer camp, St. Verena Church and Children of Light Academy and staff from liability arriving out of or in connection with this trip and activities.

I understand that participants are to follow all rules, regulations, and directions set forth by the trip organizers and supervisors (all of which are volunteers).

In the event of an accident or illness, the trip supervisors have my permission to render or arrange for whatever emergency medical treatment may be deemed necessary for the above participant.

Emergency Contact Information:

Telephone Numbers:

(____) ____ - ____ [cell]

(____) ____ - ____ [work]

(____) ____ - ____ [other]

Family Doctor's Name: _____ Phone: (____) ____ - ____

Special Medical Conditions:

Special Precautions or Limitations:

Signature of Parent/Guardian Name of Parent/Guardian

Date

(please print)

Special Instructions for Participants: *(Official Use Only)*

