

WBC HIGH SCHOOL STUDENT MISSION TRIP ORLANDO 2020 PERMISSION FORM

I, _____ (parent/guardian), give my consent for _____
(my child) to participate in the WBC High School Student Mission Trip to Orlando, Florida, March 28, 2020 to April 4, 2020 with Whitesburg Baptist Church. I do not hold Whitesburg Baptist Church, its staff, or sponsors responsible for any injuries, accidents, or illnesses incurred during the trip. I understand I am responsible for the expenses of my child's medical care and that my family insurance is primary. I further give my consent to the staff and sponsors to authorize medical treatment for my child as may be determined by them. I further give any hospital, Physician, Nurse, Medical Practitioner, EMT my consent to treat my child medically as they deem to be needed. I further give my consent for my child to ride in any vehicle the sponsors may designate. I understand that I am responsible for my child's transportation to and from the church. If my child is required to leave in advance of the time when any furnished transportation does, either for medical reasons or for discipline, then I agree to arrange and pay for transportation back to Huntsville, AL. I also give WBC the right and permission to publish, without charge, photographs and videos taken of my child during trip activities and events. They are to be used in whole or in part for publications, presentations, promotional literature, advertising, or other similar ways.

Parent (s) Printed Name

Date