



**Gulf Breeze United Methodist Church  
Permission to Leave Campus 2011/2012**

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Activity: (please check all that apply)**

\_\_\_\_\_ High School Catacombs

\_\_\_\_\_ High School Off Campus Missions

\_\_\_\_\_ Middle School Off Campus Missions

Student's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Circle One: Male    Female

**IN CASE OF AN EMERGENCY, CONTACT:**

Parent/Guardian: \_\_\_\_\_ Emergency Contact Number: \_\_\_\_\_

Alternate Contact: \_\_\_\_\_ Alternate Number: \_\_\_\_\_

STUDENT INFORMATION FORM on file **(since Aug, 2011):** yes\_\_\_\_ no\_\_\_\_

**\*\*IF NO PLEASE PROVIDE\*\***

**if yes**, list any medical/insurance information changes:

\_\_\_\_\_

**NONE** \_\_\_\_\_

**Parental Consent:**

I \_\_\_\_\_ give my son/daughter \_\_\_\_\_ permission to leave the campus of GBUMC to attend the above indicated event(s) for 2011/2012. I do hereby release and discharge Gulf Breeze United Methodist Church (GBUMC) and sponsors from any and all claims, demands, actions or cause of action, past, present or future arising out of any damage or injury to my child whose name is listed above. My permission is granted to GBUMC staff or GBUMC sponsor in charge to obtain necessary medical attention in case of sickness or injury to my child.

Parent's Signature: \_\_\_\_\_

**\*\*STUDENT INFORMATION FORMS CAN BE FOUND ON THE WEBSITE @www.gbumc.org OR AT THE YOUTH KIOSK IN THE LOBBY OR EMERGE STUDENT MINISTRIES OFFICE. \*\***