



Permission Slip Destiny Christian Church

I give _____ who is age _____

Participant's Name

permission to participate in the **Avalanche Youth Activities** from **March 9 - 10, 2012**

I understand that there is some risk involved in participating in this activity.

We, the parent(s) and child, agree to assume such risk.

I warrant that I have adequate medical insurance coverage on this child.

I warrant that my child) is in good physical health and is capable physically and mentally to participate in this activity.

I (including my spouse, heirs, executors, administrators and assigns) do hereby agree and release, indemnity and hold harmless Destiny Christian Church, its employees, agents, volunteers, successors and assigns from and against any blame and liability for any injury, harm, loss, or any other damage of any kind whatsoever, which may result or be connected to my child participation in this activity.

Parent or Guardian Signature

Date

Emergency Contact Phone

Name: _____

Home _____ Cell _____