

## Permission to Attend/Participate

West Side United Methodist Church  
900 South Seventh Street  
Ann Arbor MI 48103  
(734) 663-4164 (Office)  
(734) 663-3250 (Fax)

I, \_\_\_\_\_, legal guardian for \_\_\_\_\_  
grant permission for him/her to attend/participate in the Cedar Point trip at Sandusky,  
Ohio. This activity will take place on **July 22nd, 2010**. We will carpool from/to West  
Side United Methodist Church in personal/commercial vehicles.

I give permission for the use of the image of above named for West Side United  
Methodist Church website, videos, and other non-commercial purposes. **YES** **NO**

I am aware of the location(s) of the activity and the means of transportation being used to  
get youth to and from the activity.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Parent(s) or Legal Guardian(s) Signature(s)

\_\_\_\_\_

(date)

Parent's contact phone number(s) during activity: \_\_\_\_\_

\_\_\_\_\_

**EACH YOUTH MUST HAVE A CURRENT MEDICAL RELEASE FORM ON  
FILE WITH THE DIRECTOR OF YOUTH MINISTRIES BEFORE THE YOUTH  
MAY ATTEND.**

The form is available on the church website at: [http://www.westside-umc.org/youth/med\\_cover.htm](http://www.westside-umc.org/youth/med_cover.htm)