

# FUMC Graham Permission Form

Date: **June 25 (Allied Churches), July 22 (South Graham), and Aug (TBD)**  
**(Animal Shelter)**

Call **Brian Yoder** at **919-428-1841** with any questions.

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Printed Parent(s) Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Health Insurance Company: \_\_\_\_\_

Policy # \_\_\_\_\_

Allergies \_\_\_\_\_

I give FUMC Graham authorization to transport my child, \_\_\_\_\_  
during any of the SUMMER KIDS ON A MISSION projects using the church van or  
personal vehicles. Should emergency medical treatment be necessary while providing  
transportation, I authorize the adult leaders to act on my behalf and approve  
appropriate treatment if I cannot be reached.

I do hereby release the First United Methodist Church of Graham, the Church Staff, all  
sponsors and volunteers involved with this trip from any and all liability resulting from  
physical injury, property damage, or other injury or damage which occurs in connection  
with the trip.

\_\_\_\_\_  
(Parent/Legal Guardian printed name)

\_\_\_\_\_  
(Parent/Legal Guardian signature)

\_\_\_\_\_  
(Date signed)