



General Permission Slip

435 S. Ellison Drive, San Antonio, TX 78245
210-509-4024, www.truevinesa.org
Rev. Jesse L. Grice, Senior Pastor

This is a general permission slip, which will be kept on file. This gives adults who lead our programs for children and youth permission to take your son/daughter on a short trip on church grounds or in close vicinity of True Vine Baptist Church on campus. My son/daughter _____ has my permission to leave the building with his/her Sunday School Teacher or Youth leader on an outing during the time of Sunday School classes or scheduled youth activities.

Parent/Guardian Signature _____ Date _____

Medical Release Form

This form gives us permission to obtain emergency medical care for your child under the age of 18 that may require medical attention either on a trip or during class time.

Child's Name _____

Parent/Guardian _____

Address _____

Phone Number: Home _____ Work _____ Cell _____

Insurance Company _____ Phone# _____

Alternate Emergency Contact _____

Allergies (drug, food, environment, bees, etc.) _____

Other (any information needed for the safety of your child) _____

This information is very important for the safety and well being of your child. Please fill out and have it on the day of the trip. Without it, your child will not be able to attend unless he/she is accompanied by his/her parent or guardian. There are NO EXCEPTIONS.

Signature of parent/guardian

Date



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For off True Vine Baptist Church Grounds Day and Multi-day Trips.

This form must be filled out completely and turned in with the Medical Release form before or on the day of the trip. If not, the child/youth will not be able to attend or parent/guardian must accompany the child/youth. There are no exceptions.

Child/Youth's Name _____

Parent/Guardian _____

Address _____

Phone Number: Home _____ Work _____ Cell _____

Alternate Emergency Contact #1 _____

Phone # _____

Alternate Emergency Contact #2 _____

Phone # _____

To be filled by supervisor of the trip:

We will be leaving on this day _____ at this time _____

We will be returning on this day _____ at this time _____

If for any unforeseen reason your child/youth will not return at the designated time, you will be contacted by a Youth Leader. It is important that you as a parent/guardian be at the drop off/pick up point as designated by the Youth Leaders on time. If there is someone other than the parent/guardian of the child/youth picking them up, please let the Youth Leaders know ahead of time, or the child/youth will not be allowed to leave with anyone else. Your co-operation is needed for the safety and well being of your child/youth. There are no exceptions.

Signature of parent/guardian

Date

True Vine Baptist Church Field Trip Parent Information Form

To be filled by supervisor of the trip:

Parent Please Retain this Portion for your Records

We will be leaving on this day _____ at this time _____

We will be returning on this day _____ at this time _____

Number of Chaperons _____

Ministry Leader #1 contact Number (cell) _____

Ministry Leader #2 contact Number (cell) _____



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Child's Name _____

Parent/Guardian _____

Address _____

Phone Number: Home _____ Work _____ Cell _____

Insurance Company _____ Phone# _____

Alternate Emergency Contact _____

Allergies (drug, food, environment, bees, etc.) _____

Other (any information needed for the safety of your child) _____

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Signature of parent/guardian

Date

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