Unitarian Universalist Congregation of Gwinnett Youth Group Event Permission Form

| Name of Event: Gwin | nett County MLK Para | de Da | ate/Time: Monday, | January 16, 2017 | |
|--------------------------|---|------------------|--------------------------|--------------------|--|
| Drop-Off/Pick-Up Lo | ocation: Meet in UUCG | Parking Lo | t at 10:00 a.m.; Picku | p at 6:00 p.m. | |
| Event Location: Gwi | nnett Justice Administ | ration Center | r to Moore Middle So | chool, and UUCG | |
| | Bring cash (\$10 - \$15) table shoes; and winter | | | g your own water | |
| Adult Advisors: _ | | | | | |
| _ | | | | | |
| | | | | | |
| - | | | | | |
| - | | | | | |
| | No pre-registration required | | | | |
| ALL PARTICI | PANTS MUST HAVE T | HIS SIGNED | FORM WITH THEM | /I ON 1/16 | |
| | Please detach a | nd return th | is section: | | |
| Nama affrant Carina | ett Country MLV Down do | Dete/Time | Mandar 1/10/11 | | |
| Name of Event: Gwinne | ett County MLK Parade | Date/ Time: | Monday, 1/16/17 | ; 10:00a – 6:00p | |
| Event Location: Lawren | nceville | | | | |
| | Gwinnett Justice and Ad | | | e School | |
| Lunch: F | Restaurant in Lawrencevi | lle (TBD); Ac | tivities: UUCG | | |
| I give my consent for _ | | • • • | to pa | rticipate in the | |
| | t sponsored by the Unita urch does not accept resp | | | | |
| | authority for the staff (pa | | | | |
| action to help ensure th | ne safety, health, and wel | fare of my chil | ld, and absolve the stat | ff of liability. I | |
| | y emergency medical, sur nediately necessary or ac | | _ | | |
| | o safeguard my child's hε | | | | |
| | dical expenses not covere | | | 8 | |
| My child has the follow | ving allergies, dietary res | strictions, or n | nedical conditions: | | |
| | | Medications | | | |
| | | | | | |
| In case of emergency, I | can be reached at (| _) | or () | | |
| If unable to reach me, p | please contact: | | | | |
| Name: | Relationsh | iip | Phone () | - | |
| | | | | | |
| Parent/Guardian Signa | ature | | Date/ | / | |