



Kiama

BAPTIST CHURCH

"We seek to be a loving, relevant, growing church, honouring God & reaching our community"

Event Permission

Event: _____

Date of Event: _____

Student: _____

Phone number: _____

Other Emergency Numbers: _____

Grade: _____

I, _____ give my permission for my child to participate in the above mentioned event with Kiama Baptist Church. I understand that every effort will be made to protect the well being of my child and understand that my child will be assigned to ride with a licensed driver, driving a privately owned car.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____