

**ENGAGE STUDENT MINISTRIES 2015
CORNERSTONE BAPTIST CHURCH
RELEASE/PERMISSION FORM**



Event: Crossway Baptist Youth Camp

Date of Event: June 22 - 26, 2015

Name: _____ Grade: _____ Gender: M/F

Home Phone: _____ Cell: _____

Address: _____

City, State, Zip: _____

Parent (Guardian) Name: _____

Parent (Guardian) Phone: _____

Emergency Contact Name: _____

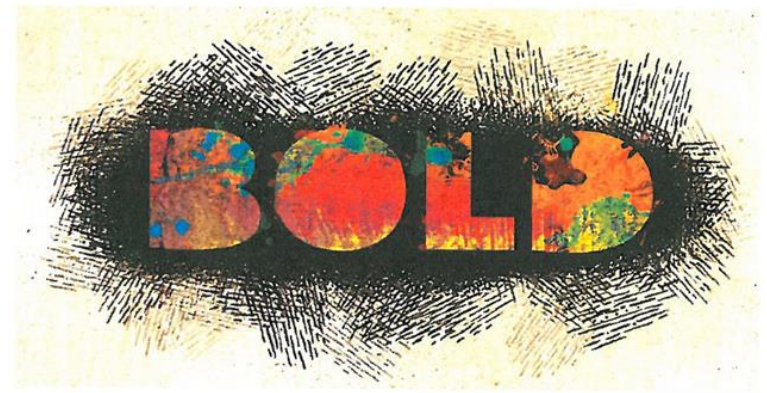
Emergency Contact Phone: _____

List Allergies: _____

I, the undersigned parent or guardian of the above applicant, do hereby release and discharge Cornerstone Baptist Church and its representative and staff from all liability of any kind, upon any claim or course of action which might be asserted on behalf of said minor against said church, representative or staff. Furthermore, in the event of an emergency, if staff is unable to contact parent or guardian, I hereby grant permission to said staff to administer necessary first-aid and/or to take applicant to the nearest hospital or medical facility for additional treatment.

Signature of Parent/Guardian

Date



T-Shirt Order Form

Please fill out the form below if you would like to purchase a t-shirt

T-Shirts are \$10 each

Name _____

Size S M L XL

Bring a Friend ½ price Deal

Please fill out the form below to claim the ½ price camp special

Your Name _____

Friend's Information:

Name _____ Phone _____

Attend church? Y N If so, where? _____

Have they attended a Cornerstone Event in the past? Y N

If yes, what event? _____

Grab a permission form for your friend and submit with this form.