

Sign In/Out

Please Return on or before the night you child attends Youthstreet if needed.

NB: PLEASE FILL OUT A SEPARATE FORM FOR EACH CHILD

Student Details (all are private and confidential)

Name: _____(Person attending the event)

Date of Birth: ___/___/ 19___

Gender: M/F (Please Circle)

Parent/Guardian Details

Name: _____

Relationship to Student: _____

Ph (Home): _____

Address: _____

Ph (Mobile): _____

I am the legal guardian of _____
(Please print name of child)

I give permission for my child to sign him/herself either: (Please tick whichever is appropriate)

Sign in for him/herself

Sign out for him/herself

of Youthstreet for this night. I am aware of the activities planned for this night and have made sure my child will be picked up or will make their own way home at the finish of the evening.

I understand and agree that every precaution will be taken to ensure the protection of the above named child. Newlife Uniting Church Robina, Pastors, Leaders and Volunteers are released of liability in the event of any accident, misfortune, damage or loss that may occur to my child or my child's property while at Youthstreet 2008

Name (Please Print): _____

Signature: _____

Date: ___/___/20___