

# LOCK-IN PERMISSION FORM

<b>Event:</b> Lock-In	<b>Date:</b> August 19-20
<b>Event Details:</b> Atlanta Braves game followed by Dave and Busters all night	
<b>Cost:</b> \$40 per person	<b>Application Due Date:</b> August 10
<b>Make checks payable to:</b> Sunrise Baptist Church	<b>Please submit form &amp; payment to:</b> Vicki Oder in the church office

Student Information		
Last Name:	First Name:	
Grade:	Age	Gender: M   F
Phone:	Email:	
Street Address:	City:	
T-Shirt Size: S M L XL XXL	Zip Code:	

Parent / Guardian Information	
Name(s):	Email:
Home Phone:	Other Phone:

Medical Information	
Health Card #:	Health Card Expiration Date:
Medical Conditions or Allergies: <small>(Please make special note of food allergies)</small>	Medication(s) Currently Being Taken: <small>(Please note medication names and times taken)</small>

## Permission Form

Student	
I promise to abide by all rules and plans set forth by the leaders of Sunrise Baptist Church during the course of this event.	
Signature:	Date:

Parent	
I / we are the legal guardians of the student named above and hereby give my/our permission for the named student to participate in the above named event with the leaders of Sunrise Baptist Church. I understand that in the event of an emergency the leaders of Sunrise Baptist Church will do everything in their power to contact me personally, but that in the event they are unable to do so, I / we give my/our permission for the leaders to seek necessary medical attention for the student named above.	
Signature:	Date: