

**Permission Form and Liability Waiver**  
***Communities that Care Above the Influence Event***

I \_\_\_\_\_, the parent/guardian of \_\_\_\_\_  
give permission for my child to attend the ***Communities That Care (CTC) Above the Influence Event on September 26, 2015.***

I hereby release ***CTC***, its employees, agents and volunteers, from any and all liability, claims, demands, causes of action and possible causes of action whatsoever arising out of or related to any loss, damage or injury that may be sustained by my child while participating in, or traveling to and from, this event. I will provide a contact number that I can be reached at in the event of an emergency, and grant CTC and its' members permission to contact emergency personnel, if it is deemed necessary. I further agree to be liable for and to provide insurance information and/or pay all costs incurred in connection with such medical attention.

The following are restrictions, allergy and medication information which I feel staff needs to be aware of for my child to participate in this event:

\_\_\_\_\_  
\_\_\_\_\_

I agree to accept full responsibility for any damage my child may do to the property.  
I agree and consent to all of the above stated.

\_\_\_\_\_  
(Parent/Guardian Signature) (Date) (Phone Number(s))

**Emergency Contact Information:**

\_\_\_\_\_  
(Emergency Contact Name) (Phone Number(s))

\_\_\_\_\_  
(Emergency Contact Name) (Phone Number(s))

**Community Standards**

The following behavior will not be tolerated at this event and I am aware that if my child violates these rules they will be asked to leave and a parent or designated person will need to pick them up immediately upon being called.

- \*Possession or use of alcohol, tobacco, or illegal drugs.
- \*Possession or use of weapons, *including pocket knives*, firearms, and fireworks.
- \*Inappropriate behaviors, to be determined by CTC members/staff/volunteers.

\_\_\_\_\_  
(Parent Signature) (Date)

\_\_\_\_\_  
(Youth Signature) (Date)

**IMPORTANT –Completed forms *MUST* be turned in to your high school office, or the BCMH registration desk, before 3pm on 9/24/15 OR can be turned in at the CTC booth the day of the event. If a permission slip is not received for a child 17 and under, the child will not be able to participate in the events following the Sick Air Show. Questions? Contact Kimberly Hendrickson at 906-201-1299.**