

Amp'd Permission Slip file date: _____
The First Baptist Church in Thomson, Georgia, Inc.

I give my permission for _____ to go with the designated leaders of First Baptist Church to Amp'd at FBC Thomson, every Wednesday school is in session from 3:30 p.m. until 5:30 p.m. during the school year.

(Signature of Parent/Guardian) (Notary) (Date signed)(Notary expires)

A Notary is provided by the church office. But the notary must see you sign this form.

Child's Name _____ Age _____ Birthdate _____

Address _____ Zip _____ Home Phone _____

School: _____ Grade _____

Emergency Contacts:

1. _____ Relationship _____

Address _____ Phone Number _____

2. _____ Relationship _____

Address _____ Phone Number _____

3. _____ Relationship _____

Address _____ Phone Number _____

Please list any medications, food, or other substance participant is allergic to and any medication presently used on a regular basis. Indicate in detail the frequency of medication dosages. List any major medical history. (Use back of this page for additional space if needed.) _____

List those who have permission to pick up your child from Amp'd. If anyone needs to pick up your child and are not on this list, please contact the church office and inform us of their names and relationship to you.

1. _____ Relationship _____

2. _____ Relationship _____

3. _____ Relationship _____

4. _____ Relationship _____

5. _____ Relationship _____

If there is anyone who is absolutely NOT to pick up your child, please note here their name and a brief explanation.
