

Parent/Guardian Consent Form

Event Next Level Church Students - Crossroads Summer Camp		Date
Student's Name		Date of Birth
Address State Zip Code		City
Parent/Guardian Name		
Telephone	Cell	Email

As the parent or legal guardian of my child, _____,
I hereby consent for my child to attend and participate in all activities as described
above.

Print Name of Parent/Guardian	
Signature of Parent/Guardian	Date