		e Christian High So Permission Slip	chool
Name of Student:		Age:	Date of Event:
Event:		L	ocation:
Time Leave:	Time Return:	Transportat	tion:
Driver's Name:		Supervisor:	
above. I also understand th		utions will be made for	ler my supervision, to attend the event as specified the trip, and therefore, I will not hold the school or
Student"). I agree on behal Westside Christian High Sc representatives thereof, aga of whatsoever kind of natur	f of myself, my child named i hool, its board of directors, a inst any and all claims, action re, including attorney's fees – injury, or occurrence arising	herein, or our heirs, suc ny and all employees or s, causes of actions, der whether occasioned in	actions taken by the above named minor ("Name of ccessors, and assigns, to release and hold harmless r volunteers, coaches, chaperones, agents, or mands, liabilities, losses, costs, damages, or expenses whole or in part by the negligent acts, errors, or n with these activities and our child's event arranged
	consent to provide authority osis, treatment, or hospital c		t of Westside Christian High School to give specific nay deem advisable.
Parent or Legal Guardian's	Signature:		Date:
Home Phone:		Work Phone: _	
		e Christian High Sc Permission Slip	chool
Name of Student:		Age:	Date of Event:
Event:		L	ocation:
Time Leave:	Time Return:	Transportation:	
Driver's Name:	Supervisor:		
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Student"). I agree on behal Westside Christian High Sc representatives thereof, aga of whatsoever kind of natur	f of myself, my child named i hool, its board of directors, a inst any and all claims, action re, including attorney's fees –	herein, or our heirs, suc ny and all employees or s, causes of actions, der	actions taken by the above named minor ("Name of ccessors, and assigns, to release and hold harmless r volunteers, coaches, chaperones, agents, or mands, liabilities, losses, costs, damages, or expenses whole or in part by the negligent acts, errors, or
transportation necessary to			n with these activities and our child's event arranged
transportation necessary to By my signature, I also give	participate.	out of, or in connection and power on the part	n with these activities and our child's event arranged t of Westside Christian High School to give specific
transportation necessary to By my signature, I also give consent to any and all diagr	participate. consent to provide authority osis, treatment, or hospital ca	out of, or in connection and power on the part are which a physician n	n with these activities and our child's event arranged t of Westside Christian High School to give specific