



溫莎華人宣道會

Windsor Chinese Alliance Church

Activity Parental Permission/Release Form

Event: WCAC Church Retreat 2023

Location: University of Guelph Ridgetown Campus, 120 Main St. E, Ridgetown, ON

Date: May 20, 2023 to May 22, 2023

I hereby give permission to my son / daughter _____ *Print Child's Name* _____ to participate in the above noted activity. In the case of injury or illness, I authorize the responsible adult from WCAC to render emergency first aid and/or seek all necessary medical attention for my son/daughter. In such case, I understand that I will be notified as soon as possible. I agree to hold harmless and blameless the leadership of WCAC and any adults participating in or providing assistance for the activity. In the event of any injury and illness of my son / daughter resulting from participating in this activity, I waive all rights to any civil action against the above noted parties including WCAC.

Name of Parent or Guardian

Signature

Date

Please list all telephone numbers where you can be reached during the above noted dates in the event of emergency.

Daytime Phone Number

Evening Phone Number

Cellular Phone Number

Please list an alternative contact person in case we are not able to reach you in the event of emergency.

Name of Contact Person

Phone Number

Please list any medical condition, including allergies that your son/daughter has and provide the health card number of your son/daughter.

Allergies and/or Medical Conditions

Age of Child

Health Card Number