

**Horse Cave Baptist Church**  
**301 E. Main Street**  
**Horse Cave, KY 42749**  
**Permission Form for Minors**

**TO WHOM IT MAY CONCERN:**

As parent/legal guardian of \_\_\_\_\_  
(Name of Minor)  
age \_\_\_\_\_, I give my permission for the above-named to participate in  
\_\_\_\_\_, which is an activity  
(Activity)  
Sponsored by the Horse Cave Baptist Church, on \_\_\_\_\_  
(Date)

I have made a decision that my child is mature enough to attend the activity  
and I am not relying upon any special supervision from the adult sponsors.

I give the adult sponsors the right to obtain medical treatment for the above-  
named minor on my behalf in the event an emergency may arise.

I also understand that this activity may involve transporting the above-  
named minor by church van or private vehicle from location to location. I hereby  
release the HORSE CAVE BAPTIST CHURCH, INC., its agent, officers, leaders,  
and adult sponsors from any and all liability whatsoever with regard to the above  
activity.

\_\_\_\_\_  
SIGNATURE OF PARENT/GUARDAIN

\_\_\_\_\_  
PRINT NAME OF PARENT/GUARDIAN

ADDRESS: \_\_\_\_\_

\_\_\_\_\_  
TELEPHONE NO:

DATE: \_\_\_\_\_