



FBC Frederick

CONNECTING CHURCH, HOME & COMMUNITY

(Please fill out a separate form for every child.)



Name: _____

Birthday: _____ Grade: _____ Age: _____

Address: _____

Guardian: _____ Phone: _____

Secondary Contact: _____ Phone: _____

Allergies: _____

Bus Pickup	Yes	No	Bus Dropoff	Yes	No
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In case of an emergency during any activity in the 2019-2020 BLAST program, I give consent to the rendering of first aid measures or pursuing emergency services should neither contact be available. In case of discipline problems, I give BLAST leaders consent to send them home or bring them home early if neither contact is available. I also give consent for the church to use pictures of my child taken at BLAST activities in their community outreach materials including social media.

Signature: _____ Date: _____



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