

SWITCH Permission Form

Dear Parent or Legal Guardian:

Your son/daughter is eligible to participate in a SWITCH Small Group activity requiring transportation to a location away from the RCC building. This activity will take place under the guidance and supervision of RCC Ministry Partners and/or staff.

A brief description of the activity follows:

Name of Event: _____

Destination: _____

Designated Supervisor of Activity: _____

Departure(Date & Time): ___/___/___ __:___ Return(Date & Time)___/___/___ __:___

Transportation: _____

Student Cost: _____

If you would like your child to participate in this event, please complete, sign, and return the following statement of consent and release of liability. As parent or legal guardian, you will remain fully responsible for any legal responsibility which may result from any personal actions taken by the named student.

I hereby consent to participation by my child, _____, in the event described above. I understand that this event will take place away from the RCC Campus and that my child will be under the supervision of the designated personnel on the stated dates. I further consent to the conditions stated above on participation in this event, including the method of transportation.

Students must return this form to attend.

_____ (Print Parent's Name)

_____ (Parent's Signature)

_____ (Date)