Imprint Permission Slip Form

I	, the parent of	("my child"),
give permission for my child to at	tend the Imprint Youth Re	treat at Camp Yavapines located in
Prescott, Arizona.		
I understand that personal	injury can and may occur	to my child, and I hereby authorize
Leader of the trip- Chape		or another appointed youth advisor,
		ild as needed; and I further agree to
be liable for and to pay all costs inc	curred in connection with s	uch medical attention.
I hereby release the Arizona	Conference Corporation, it	es employees, agents and volunteers,
from any and all liability, claims	s, demands, causes of act	ion and possible causes of action
whatsoever arising out of or relate	ed to any loss, damage or i	njury (including death) that may be
sustained by my child while partic	ipating in or traveling to ar	d from this event.
I give permission for my child	to ride in any vehicle of	lesignated by Arizona Conference
Corporation, its employees and ad	ult volunteers, while partic	ipating in and traveling to and from
this event.		
I agree to accept full respon	sibility, financially or othe	rwise, for any damage my child may
do to the property of the Arizona	a Conference Corporation	visited on outing, other's personal
property, or vehicles used for trans	sportation.	
I agree and consent to all of	the above stated.	
Parent Signature	Date	
Emergency Contact Name		
Phone Number		
Relationship to person attending I	mprint	