



Eastern Assembly of God  
7923 Wise Ave  
Baltimore, MD 21222  
Ph—(410) 285-6010  
Fax—(410) 285-7563

\_\_\_\_\_ has permission to  
(Child's name)

Participate in \_\_\_\_\_

On \_\_\_\_\_.

I understand that the church, through the leadership supervising the trip, will exercise every precaution for the safety and conduct of the child attending. I will talk to with my child about the Importance of assuming personal responsibility by co-operating with the leaders and using good judgment at all times.

Signature of parent

\_\_\_\_\_  
Emergency phone number

\_\_\_\_\_  
Date signed \_\_\_\_\_