

# FIRST BAPTIST CHURCH BATTLEFIELD

*It's all about HEART*



## Authorization Form

### Authorization Section

I \_\_\_\_\_ give permission for my son/daughter \_\_\_\_\_ to attend \_\_\_\_\_  
(Parent's Full Name) (Student's Full Name) (event name)

on \_\_\_\_\_. I am aware that the students will be leaving the church ground for the event which will be  
(date of the event)

held at \_\_\_\_\_. I then grant permission for him/her to leave First Baptist Church of Battlefield  
(location of the event)

to attend the event.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### Medical Section

I \_\_\_\_\_ further understand that \_\_\_\_\_ cannot attend \_\_\_\_\_  
(Parent's Full Name) (Student's Full Name) (event name)

without the full completion of all Medical Release forms. I understand that these forms release First Baptist Church of Battlefield from any and all actions, damages, or liabilities arising out of the treatment of any sickness or accident incurred by my said child or ward, or the disclosing any information, if requested. I further understand that in the event of a medical emergency requiring medical care, as I have authorized below, all costs for such emergency care ARE MY RESPONSIBILITY and I agree to make payment of all such medical costs.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### Student Account Section

I am also authorizing Pulse Ministry to deduct \_\_\_\_\_ from my child's account to pay for my child to  
(total amount to deduct)

attend this event.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date