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COPTIC ORTHODOX PATRIARCHATE
THE CHURCH OF VIRGIN MARY AND ST. ATHANASIUS

Convention Permission and Release form -
Servants who are **18 YEARS OR OLDER**

Trip/ Activity: Children Convention
From: Aug. 9, 2019 @ 8:00 AM

Place: Sheridan College, Trafalgar Campus, Oakville
To: Aug. 11, 2019 @ 3:00 PM

Participant

Name: _____

The Church of : _____

Address: _____

City: _____

Postal Code: _____

Phone #: _____

OHIP card # _____

Date of Birth: _____

Special condition, medications or allergies: _____

Family Doctor Name: _____ Phone: _____

Emergency contact Name: _____ Phone: _____

By signing this form I, _____ (the Participant)

1. agree to participate in this trip/activity of the church of virgin Mary and St. Athanasius (the church)
2. agree that I will abide by all the rules and regulations of the trip/activity and the instructions of the Trip /Activity leader(s); otherwise, I be returned on my expenses
3. permit the Church, the trip/activity leader(s), or whom they may designate, to act on my behalf, if I cannot do so, in case of medical emergencies or accidents pertaining me, the participant, during the trip/activity
4. Authorize the medical doctor, hospital or medical center to act as they see fit to treat me in case of emergencies or accidents; I will be responsible for the cost of the treatment or medical procedures; and
5. release the Church and its priests, directors and members as well as the trip/activity leader(s) from all liabilities or responsibilities that may arise from accidents or other events during the trip/activity.

Signed at the City of _____

On: _____

Participant signature _____

