

Springhill Baptist Church, Springhill, NS
Youth Medical Release Form / Permission Slip

Name of activity and date: All-Nighter, March 18-19, 2026.

Time we are starting: 7:00 PM, Time we are ending: 8:00 AM

Youth Group member needs to bring: Bible, favourite snack, water bottle, athletic shoes, comfortable clothes to move in, skates, hockey helmet, blanket or other cozy item, pjs or other comfy clothes, toiletries, any required medications if needed between these hours, small bag or backpack to keep things together.

Please leave at home: energy drinks, expensive or irreplaceable items, anything that could hurt others or damage property, alcohol, drugs, or vaping products. These items will be confiscated and only returned to an adult.

For further information prior to the activity contact:

Pastor Natasha: 902-921-8299

----- PARENTS: CUT HERE AND RETAIN TOP PORTION -----

I, _____, give my permission for my son/daughter, _____,

to participate in the activity of All-Nighter, March 18-19, 2026.

In the event of a medical emergency, my child may be taken to the nearest hospital for immediate medical care.

Parents'/Guardians' Names: _____ Contact #: _____

Emergency Contact: _____ Phone: _____

Youth's NS Health Card Number: _____

Dietary Information, Allergies or any other specific medical information we need to know:

>>> Parent's/Guardian's Signature: _____

I will obey basic ground rules set by the Youth Group Advisors.

>>> Youth's signature: _____

----- RETURN THIS PORTION BY: Wednesday, March 4, 2026, 5:00 PM -----