



# HAWAII KAI CHURCH

265 Lunalilo Home Rd., Honolulu, Hawaii 96825  
(808) 395-9494 fax (808) 395-9492 email

## PERMISSION FORM For HKC Youth Activities

*This is a general form to be used for giving permission to participate in HKC Youth sponsored activities at HKC or off site within Oahu. Trips off island will require a specific permission form. If a parent or guardian would like to limit this permission to a specific youth activity or activities, please indicate such on this form. THIS FORM MUST BE RETURNED TO HKC BEFORE ANY YOUTH MAY PARTICIPATE IN OVERNIGHTS OR YOUTH ACTIVITIES WHICH WOULD TAKE HER OR HIM OFF THE HKC CHURCH GROUNDS. The following rules are standard for all HKC Youth activities:*

RULES: It's all about building community and respecting one another...

- ♥ No leaving sponsored activity without prior arrangement. No
- ♥ No sexual activity – one person per sleeping cover.
- ♥ No illegal drugs or misuse of prescription drugs.
- ♥ No walk-ins or visitors.
- ♥ No alcohol and tobacco usage.
- ♥ R\*E\*S\*P\*E\*C\*T: Respect each other, the adults, the church & other property.

Name of Youth Participant \_\_\_\_\_ has permission to participate in activities sponsored by the Hawaii Kai Church Youth program between (dates) \_\_\_\_\_. These activities may include overnights at the church or HKC youth-sponsored programs throughout Oahu.

\_\_\_\_\_  
*Parent/Guardian Signature Printed Name Date*

I have read the above rules and acknowledge them as my guide for participation in HKC Youth activities. I will follow any additional rules established by the Church Staff and/or Community. I understand that if I break the rules I may be asked to discontinue my participation in the current event and jeopardize my ability to participate in future HKC Youth activities:

\_\_\_\_\_  
*Participant's Signature Printed Name Date*

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**EMERGENCY MEDICAL RELEASE FORM**

In consideration of Hawaii Kai Church organizing certain activities and events and allowing my child to participate in such activities and events, neither my child nor I (nor our respective heirs, successors, executors, administrators, or assigns) will hold Hawaii Kai Church or its agents responsible or institute suit for any damage, loss or injury that may be sustained as a result of my child's participation in the activity identified at the top of this page. I realize precautions will be taken against accidents. I give my permission for emergency medical treatment for my child.

\_\_\_\_\_  
*Name of Youth Participant*

\_\_\_\_\_  
*Parent/Guardian Signature Printed Name Date*

I do \_\_\_ / do not \_\_\_ give permission for my child to ride with a licensed driver under age 21:

\_\_\_\_\_  
*Parent/Guardian Signature Printed Name Date*

\_\_\_\_\_  
*Relationship Day Phone # Evening Phone #*

The following information will facilitate prompt emergency medical care of your child if such treatment is required during a youth group activity:

Doctor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Medication/Allergies: \_\_\_\_\_

**Return this signed permission form to Hawaii Kai Church Attn: Aaron Dieringer, 265 Lunalilo Home Rd, Honolulu, HI 96825 or turn in to the church office before your youth plans to participate in an overnight or an event which takes her or him off the church grounds.**