

# Element Café Permission Form

Please Return To:

Trinity United Methodist Church

Element Student Ministry

Attn: Robert Sturdivant

1400 Oxmoor Road

Homewood, AL 35209

205.879.1737

## Student Information:

Name:

Address:

Cell Phone Number: #(     )-     -     ; Provider:\_\_\_\_\_

Would you like to receive weekly text message updates about Element Café & other events occurring at Element? Standard Text Message Rates Apply.

YES  NO

## Parent Information:

Name:

Home Phone:

Cell Phone

Work Phone:

Emergency Contact Name & Number:

Email:

I, \_\_\_\_\_, give my child, \_\_\_\_\_, permission to participate in Element Café, including open gym time. I/We agree to not hold Trinity United Methodist Church, it's leaders, employees, and volunteer staff liable for damages, losses, or injuries.

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Parent/Guardian Signature

Date

PLEASE, BOTH YOU AND YOUR STUDENT SIGN THE CODE OF CONDUCT FORM ATTACHED TO THE BACK OF THIS SHEET AND RETURN BOTH TO ELEMENT STUDENT MINISTRY.

THANK YOU! STAFF OF ELEMENT STUDENT MINISTRY