

SPECIAL ACTIVITY AUTHORIZATION FOR MINORS

I hereby grant permission for _____
to participate in activities sponsored by the Children's Ministries Department of First
Presbyterian Church of Concord, and receive any emergency medical, surgical or first-
aid attention that might be required in the event of an accident or illness. (It is
understood that an effort shall be made to contact the undersigned prior to rendering
treatment to said minor patient, that treatment will not be withheld if the undersigned
cannot be reached.) This authorization is given pursuant to the provisions of Section
25.8 of the Civil Code of California.

Signature of Parent/Guardian _____ Date _____

Medical Plan _____ Medical # _____

