



Come To The St. Thomas EYC Challenger Center Trip

On February 4th, the St. Thomas EYC will be going to the Challenger Center for a day of fun and education. We will meet at St. Thomas at 10 AM and head down to the Challenger Center. We will eat lunch around noon. Then we will do some hiking and exploring at the park. At 3:00 PM we will take part in a mission control simulation at the George Observatory. Around 4:30 we will eat dinner. Then, at night, the observatory opens up for some nice star gazing. The plan is to be done around 8 PM and back at St. Thomas by 10 PM. You will need a standard permission slip (available on the other side of this flier), \$25 dollars for the event, and (if you like) a friend. This is going to be a fun event, and it is important that it is broadly supported as we had to pre-pay for some of the activities.

PARENTS I NEED DRIVERS AND CHAPERONES FOR THIS EVENT

*St. Thomas the Apostle Episcopal Church
Nassau Bay, TX*

2012 Medical Release Form

Child's name:-----

Chronic Illnesses and
disabilities-----

Allergies-----

Routine medications, amount and times taken-----

Any other medical information-----

Any physical or medical restrictions-----

Last tetanus immunization (Booster shot)-----

Insurance Information

Policy#-----	Group #-----	Policy Name-----
Insurance Company-----		Policy Holder-----
Address-----		Address-----
City-----	State-----	Zip-----
		City-----
		State-----
		Zip-----
Parent hm. phone _____	Emergency contact: _____	
Parent wk. Phone _____	Emergency contact's phone: _____	

The insurance will cover my child and I understand it is my responsibility to pay for any resulting unpaid fees. It is expected that in case of accident or emergency that the parent or Legal Guardian will be notified as soon as possible.

In the event of accident or emergency, I hereby authorize in my absence St. Thomas the Apostle Episcopal Church or their duly authorized agent to act in my behalf to give permission to any licensed physician and accredited hospital or clinic to perform any medical and/or emergency care deemed essential for the treatment of my child. This authority is in effect until I am reunited with my child but covers the period January 1, 2012 to December 31, 2012.

(Signature of Parent or Legal Guardian)

(Date Signed)

*St. Thomas the Apostle Episcopal Church
Nassau Bay, TX
(281) 333-2384*

**Permission Slip
Assumption of Risk**

Trip:-----

Student's Full Name Social Security No. Trip Date

The above named person has my permission to attend and participate in the above named trip sponsored by St. Thomas the Apostle Episcopal Church. It is understood that transportation will be by chartered bus, school bus, van or car driven by a licensed responsible adult. My child will be supervised by an employee of St. Thomas the Apostle Episcopal Church or by one of the parents of the participants or a volunteer and that reasonable care and precautions can be expected at all times. I am aware that participation in the trip in which my child is to attend involves certain inherent risks, including, not exclusively, the hazards of highway road travel and travel in mountainous and other remote areas, without communication or medical facilities, and subject to the unpredictable forms of nature. Knowing of such inherent risks and dangers, and in consideration of the right of a minor to participate, as Legal Guardian of said minor, I represent and agree as follows that my child is healthy and fully capable of participation in said trip without causing risk of danger, illness, or accident to himself or herself or to others.

I agree to hold harmless the leaders of my church, the youth sponsors, the Bishop of the Episcopal Diocese of Texas and the Episcopal Diocese of Texas in the event of any accident or injury, except in cases of gross criminal negligence.

I have carefully read this agreement and understand its contents, and I sign it of my own free will. References herein to "I" shall include any such family member.

Signature of Parent or Legal Guardian Date Signed

Emergency Telephone Numbers:

Mother's Name Home/Work Phone

Father's Name Home/Work Phone

Relative/Friend's Name Home/Work Phone