

PARENT/GUARDIAN CONSENT FORM

I, _____ being the parent or legal guardian
(NAME of PARENT OR GUARDIAN)

of _____ hereinafter referred to as " my child."
(NAME OF MINOR)

am informed of the activities offered by Macedonia Missionary Baptist Church
Inc. (hereinafter "this camp," "church," "school", etc.) located at: in the City of ,
Fayetteville County of Cumberland, and State of North Carolina beginning on
the day of _____ , and ending on the day _____
(beginning date) (ending date)

As the parent or legal guardian of my child, I hereby consent for my child to
attend and participate in all activities provided by this (CAMP, CHURCH,
SCHOOL, ETC.).

(SIGNATURE OF PARENT OR GUARDIAN)

Additional Information:

My child is to be **excluded** from the following activities: