

**PARTICIPATION PERMISSION & MEDICAL RELEASE FORM**  
**YOUTH MINISTRIES 2023-2024**

Please *initial* which ministries your child may participate in:

**Sunday School/Religious Education** (grades Pre-K thru 8) \_\_\_\_\_  
**Greek School Program** (Additional registration forms needed if  
your child is registering for Greek School) \_\_\_\_\_

**Mommy & Me** (ages infant thru 4) \_\_\_\_\_

**J.O.Y. Junior Orthodox Youth** (ages 5 thru 11) \_\_\_\_\_

**G.O.Y.A. Greek Orthodox Youth of America** (ages 12 thru 18) \_\_\_\_\_

**ALTAR BOY** (boys ages 7 and older) \_\_\_\_\_

**Child's Full Name** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**City, State, Zip Code** \_\_\_\_\_

**Date of Birth** \_\_\_\_\_ **Age** \_\_\_\_\_ **Nickname (if preferred)** \_\_\_\_\_

**Home** \_\_\_\_\_ **Cell** \_\_\_\_\_ **Email** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_ **Relationship** \_\_\_\_\_

**Parent Cell** \_\_\_\_\_ **Emergency** \_\_\_\_\_ **Email** \_\_\_\_\_

I give my child \_\_\_\_\_ permission to participate in the any/all of the above listed Assumption Youth Ministry Programs and associated event/field trips.

I agree to indemnify and hold harmless the Assumption Greek Orthodox Church of Manchester, NH, and its constituent representative organizations from any and all liability for personal injuries and/or property damage or loss to my child that may arise in any way from participating in these programs/activities. This includes, but is not limited to, transportation to or from any activities, including liability that results from alleged negligence of the church and its representatives.

Furthermore, I agree to allow my child \_\_\_\_\_ to be treated for emergency medical conditions that should result from any injuries received, providing such treatment is advised by a medical physician. I accept full responsibility for any and all cost, which may be related to such treatment.

**PLEASE LIST ALL CURRENT MEDICAL CONDITIONS / ALLERGIES:**

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**Child's Physician** \_\_\_\_\_ **Phone** \_\_\_\_\_

**I (parent/guardian)** \_\_\_\_\_ **am currently a member in Good Standing of the** \_\_\_\_\_ **Greek Orthodox Parish in** \_\_\_\_\_ **NH.**

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