

SCHOLAR NAME: \_\_\_\_\_

YOUTH THEOLOGICAL INITIATIVE - 2017 SUMMER ACADEMY

## **PARENT/GUARDIAN COMMITMENT & PERMISSION FORM**

(to be completed by parent/guardian)

**INSTRUCTIONS:** Please **initial** the blank in front of the appropriate statement(s) to acknowledge your permission and commitment, and sign at the bottom.

\_\_\_\_ I HEREBY GIVE MY DAUGHTER/SON PERMISSION to attend the entire 2017 Youth Theological Initiative Summer Academy at Emory University. I have read the statements that my daughter/son has signed, and I concur.

**Scholars *must* be present for the *entire* program, arriving on **July 22nd departing on July 22.****

\_\_\_\_ I agree to arrange transportation for my daughter/son to arrive at Emory between 10 a.m. and 4 p.m. on **Sunday, July 2, and to depart on Saturday morning, July 22, by 12 noon.**

**Parents/guardians must assume responsibility for any medical costs incurred by scholars.**

\_\_\_\_ My daughter/son is currently covered by my insurance for accident and illness, or I (the parent/guardian) will be responsible for any and all costs having to do with accident or medical illness while my daughter/son is attending the Youth Theological Initiative Summer Academy.

**Parents/guardians must assume responsibility for any damages to Emory University property incurred by scholars.**

\_\_\_\_ I accept responsibility for any damages to Emory University property for which my daughter/son is responsible.

**Parents/guardians must grant permission for scholars to leave campus under any circumstances. At times, it will be necessary for scholars to be transported to places off campus. With permission, scholars will also be allowed to leave campus on visitation Saturday **(July 15<sup>th</sup>)** with relatives or friends.**

\_\_\_\_ I grant permission for my daughter/son to leave campus in a public/private vehicle with YTI-authorized personnel for YTI-sponsored events, or in case of an emergency.

\_\_\_\_ I grant permission for my daughter/son to leave campus with the relatives or friends listed below on Visitation Day, **Saturday, July 15<sup>th</sup>**, between 9 a.m. and 5 p.m.

Name(s): \_\_\_\_\_ Phone # \_\_\_\_\_

Name(s): \_\_\_\_\_ Phone # \_\_\_\_\_

Name(s): \_\_\_\_\_ Phone # \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_