Emerge Youth Ministry trip permission: Fall Retreat at Aldersgate Camp

Friday, Nov. 2 – Sunday, Nov. 4

Dropoff at Richmond FUMC at 4:30 p.m. Friday;	Pickup at Richmond FUMC at 12:30 p.m. Sunday
•	
to attend the Fall Retreat at Alders	
Parent signature:	Date:
Dropoff at Richmond FUMC at 4:30 p.m. Friday;	Sunday, Nov. 4 Pickup at Richmond FUMC at 12:30 p.m. Sunday Int Form for 2018-2019 for my child(ren). Iny changes relative to the information in ne numbers, medication, etc.).
Parent signature:	Date:
Dropoff at Richmond FUMC at 4:30 p.m. Friday;	ion: Fall Retreat at Aldersgate Camp Sunday, Nov. 4 Pickup at Richmond FUMC at 12:30 p.m. Sunday at Form for 2018-2019 for my child(ren). By changes relative to the information in

that form (insurance, allergies, phone numbers, medication, etc.).

Parent signature: ______ Date: _____

to attend the Fall Retreat at Aldersgate Camp Nov. 2-4, 2018.

◊ I give permission for my child(ren): _