

Youth Permission Slip

For Activities with First Baptist Church of Bellville 4099 HWY 36 N Bellville, TX 77418-2725



Office-(979) 865-3644-Student Minister-(903) 780-1099

I give permission for my child _____

to participate

in the planned activities with the First Baptist Church of Bellville Youth Group designated below. I understand that reasonable plans have been made to ensure the safety and welfare of all participants. I also understand that volunteer adults and staff will be chaperoning youth activities and will take reasonable actions as they deem necessary to protect the best interests of all participants. In signing this document, my child agrees to conduct himself/herself in a safe and orderly manner and will cooperate with decisions made by the adult chaperones.

Activities: 2025 FBC Bellville DNOW Weekend

Dates: ___01/31/25 - 02/02/25__

Times: ____7:00 PM (01/31) – 12:00 PM (02/02)

Location: First Baptist Church, Bellville, TX

I have read and understood the conditions described above and give permission for my child to participate in this youth group activity.

(If riding the First Baptist Church of Bellville Church Bus)

I give my son/daughter ______ my permission to ride the Church provided vehicles for youth related activities: and release First Baptist Church of Bellville from any damages which may result due to accident or injury. I, the undersigned, hereby authorize a representative of First Baptist Church of Bellville to consent to and authorize emergency medical treatment, surgery or dental care to be given to my son/daughter as considered advisable or necessary in the judgment of an emergency medical professional or attending physician.

Signature of Youth (If over 18)	Date	
Signature of Parent/Guardian (print)	Date	
Primary Phone	Secondary Phone	

Medication Form:

I the parent/guardian consent to allowing a First Baptist Church of Bellville volunteer/staff to hold any medication of my child, and understand that this medicine is not being withheld, but being protected. I, hereby, give permission for any volunteer to distribute my child's medicine, to my child, as necessary.

Name of Youth		Age	
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The volunteers are carrying the following prescription and over-the-counter medicines with them and have my permission to self-administer these medicines.

Medication	Dose	Frequency

Note: Please send all medications in original containers when possible. If this is unavailable, all medications should be in a container labeled with administration information and the youth's name.

Other medical concerns and/or allergies that the First Baptist Church of Bellville volunteers should be aware of during this trip: (please include any allergies to medicine as well)

Parent/Guardian

Date

I _______ also understand that volunteer adults and staff will be chaperoning youth activities and will take reasonable actions as they deem necessary to protect the best interests of all participants. In signing this document, I agree to conduct myself in a safe and orderly manner and will cooperate with decisions made by the adult chaperones. I also understand that if I refuse to cooperate with the decisions made by the adult chaperones, I may be sent home from this youth activity. By signing my name above and below, I agree to follow the rules given during this event.

Signature of Youth

Date

PACKING LIST:

- BRING A BIBLE
- Notebook/pen for taking notes
- Sleeping Bag/Pillow/Blanket: You will be sleeping on the floor in most homes.
- o Towels/washcloths
- Toiletries (deodorant, soap, toothbrush, etc.)
- Clothes for TWO days/nights and church on Sunday morning (we will all wear our DNOW shirts on Sunday to the 10:45 AM worship service)
- SNACKS! We will be providing meals, water, and some snacks, but you will be need to probably bring some of your own snacks for homes.
- Spending Money (just in case...we recommend \$20).
- \circ 2025 DNOW Youth Permission Slip

UNPLUG THIS WEEKEND:

 Since the purpose of this weekend is to get away from the world for a time of renewal, we are asking students not to bring electronics on this particular trip. Cell phones are allowed, but we do not want them to be a distraction or the focus of this weekend.

2025 DNOW SCHEDULE:

Friday, January 31st

Time	Location	Activity
4:00	Youth Room	Leaders Arrive
6:45	Youth Room	Students Arrive
7:00	Outside	Student Fellowship
8:30	Sunday School	Small Group Introduction
9:00	Sanctuary	Worship #1
10:00	Sunday School	Small Group #1
10:30	Youth Room	Gather & Head To Host Homes
11:30	Homes	Lights Out

Saturday, February 1st

Time	Location	Activity
8:00	Homes	Breakfast
9:30	Homes	Head To Church
10:00	Sanctuary	Worship #2
11:00	Sunday School	Small Group #2
11:30	Outside	Rec Time #1
12:30	Children's Room	Lunch
1:00	Youth Room	Rec Time #2
3:00	Youth Room	Return To Church
3:30	Youth Room	Gather & Head to
		Host Homes
5:00	Homes	Head To Church
5:30	Children's Room	Dinner
6:00	Sunday School	Group Prayer Time
6:15	Sanctuary	Worship #3
7:45	Sunday School	Small Group #3
8:15	Youth Room	Gather & Head To
		Host Homes
11:15	Homes	Get Ready For Bed
11:45	Homes	Lights Out

Sunday, February 2nd

Time	Location	Activity
8:00	Homes	Breakfast
9:00	Homes	Head To Church
9:30	Youth Room	Sunday School Hour
10:30	Sanctuary	Sunday Worship
12:00	Sanctuary	Go Home