



# NEW SPRING

# bonfire night



## PERMISSION FORM

NEW SPRING  
youth

Real Life Youth has once again been invited to join New Spring Youth for a night by the fire!

### EVENT DETAILS

- **When:** Friday, June 12th, 2026
- **Where:** New Spring Church (Corner of Lake Rd and Centre Rd, Camillo)
- **Drop-off:** Youth can be dropped off at New Spring Church at **6:45 pm**
- **Pick-up:** Youth can be picked up from New Spring Church at **9 pm**. Before leaving, please check in with a youth leader

### TRANSPORT:

**To the venue:** Meet at Real Life Church no later than **6:15 pm**

**From the venue:** Youth will arrive back at Real Life Church by **9:30 pm**

### BEFORE THE NIGHT:

- Hand in your completed form to a leader by **Friday, June 5th**
- Contact **Thabo on 0423 489 712 in advance** to arrange transport, if needed

### MEDIA RELEASE & WAIVER

I give my consent for my child(ren) to be captured on photographic, video, and audio media.

I understand and agree that:

- Real Life Youth reserves the right to use this material for promotional purposes.
- The name of my child(ren) will not be posted alongside any media.

YES  NO

→→ FORM CONTINUES ON THE BACK →→



# NEW SPRING

# bonfire night



## PERMISSION FORM



### HEALTH & SAFETY INFORMATION

Please list any allergies, medical conditions, or special needs leaders should be aware of during this event:

.....

.....

.....

.....

I, \_\_\_\_\_, hereby give permission for my child(ren),

\_\_\_\_\_ to attend the event. I acknowledge that the leaders and volunteers at Real Life Youth will act in the best interest of all the youth to protect and keep my child(ren) safe.

I understand that personal injury can and may occur to my child(ren), and I hereby authorize Real Life Youth, to seek and consent to emergency medical attention for my child(ren) as needed. I further agree to be liable for and to pay all costs incurred in connection with such medical attention. The above is all the health and safety information necessary for my child(ren) to receive appropriate medical care.

I hereby release Real Life Youth, and its volunteers, from any and all liability, claims, demands, causes of action and possible causes of action arising out of or related to any loss, damage or injury (including death) that may be sustained by my child(ren) while participating in or travelling to and from this event.

I give permission for my child(ren) to ride in any vehicle designated by Real Life Youth, its employees and adult volunteers while participating in and travelling to and from this event.

I agree to accept full responsibility, financially or otherwise, for any damage my child(ren) may do to the property of Real Life Youth, properties visited on the outing, others' personal property, or vehicles used for transport.

I have read and consent to the terms of this form, and confirm that all details provided are correct.

PARENT/GUARDIAN NAME: \_\_\_\_\_

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