



Van Ministry  
Permission Form, 2017-2020

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Last First Middle

Age: \_\_\_\_\_ Current School Grade: \_\_\_\_\_ Male: \_\_\_\_\_ Female: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Parent's Name (Father): \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_

Parent's Name (Mother): \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_

\_\_\_\_\_ has permission for Wall Highway Baptist Church to  
Name of Child

transport my child by van or other adult driven vehicle to and from Wall Highway Baptist Church for church sponsored or church related activities within the Youth Ministries during the years of 2017-2020. I understand that a Medical Release and Permission Form must be completed, returned and on file for a child to be transported.

Parent/Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_