

Teen Release Form



Date _____

I _____, give my child _____, permission to check out the following children from the Garden and/or the Greenhouse.

1. _____ Age: _____

2. _____ Age: _____

3. _____ Age: _____

4. _____ Age: _____

I verify that _____ is in high school and at least 14 years of age. His/her date of birth is _____. I understand that by signing this form I cannot hold Kid Life Ministries or Christian Life Fellowship responsible for accidents that occur after my child/children is/are checked out of the children's department and under the care of their older sibling/guardian.

Parent Signature: _____