



**Eight Locations:** Maryetta, Maryetta Teen, Rocky Mountain, Stilwell, Westville, Zion, Zion Teen & Dahlongah

**Administration Office:** 421 W Pine Street Stilwell, OK 74960

918-696-2202 or on the web at [bgcofadaircountyschools.com](http://bgcofadaircountyschools.com)

## Permission Form Wavier

I \_\_\_\_\_, the Parent or Guardian of  
\_\_\_\_\_ ("my child"), give permission for my child to attend  
field trips between May 20, 2025 to July 31, 2025.

I understand that personal injury can and may occur to my child, and I hereby authorize Boys & Girls Clubs of Adair County Schools' staff to seek and consent to emergency medical attention for my child as needed; and I further agree to be liable for and to pay all costs incurred in connection with such medical attention.

I hereby release Boys & Girls Clubs of Adair County Schools, its employees, and volunteers, from any and all liabilities, claims, demands, causes of action and possible causes of action whatsoever arising out of or related to any loss, damage or injury (including death) that may be sustained by my child while participating in or traveling to and from this event.

The following is all the insurance information, restrictions, allergy and medication information necessary for my child to receive appropriate medical care.

\_\_\_\_\_

\_\_\_\_\_

I give permission for my child to ride in any vehicle designated by Boys & Girls Clubs, its employees, and adult volunteers, while participating in and traveling to and from this event.

I agree to accept full responsibility, financially or otherwise, for any damage my child may do to the property of Boys & Girls Clubs of Adair County Schools, properties visited on outing, other's personal property, or vehicles used for transportation.

I hereby grant permission to Boys & Girls Clubs of Adair County Schools to use my child's photograph, video image, audio clip on social media, Boys & Girls Clubs Website and in Local Newspaper.

I agree and consent to all the above stated:

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Emergency Contact Name

\_\_\_\_\_  
Phone Number)