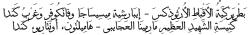


Coptic Orthodox Patriarchate Diocese of Mississauga, Vancouver and Western Canada Saint Mina's Coptic Orthodox Church - Hamilton, Ontario, Canada

пішанпатріархнс прешнхнші пороодогос пішанепіскопос нте шісісаха неш фанкотфер неш пешент нте канада †еккянсіа нте піатіос авва Инна - зашятон, онтаріо, канада





Church Trip/Activity Consent Form

Data (From /To):	
Date (From/To):	
Participant Name:	School Grade:
Home Address:	
	(Postal Code)
Home Phone:	Cell Phone:
OHIP Card Number:	Date of Birth:
Medical Conditions:	
Family Doctor:	Phone:
Parent's/Guardian's Name:	Cell Phone:
Emergency Contact:	Cell Phone:
Du signing helevy I sutherize	to newticinate in the above named event/s) spensored by Saint
	to participate in the above named event(s) sponsored by Saint
reached, I authorize the church representative to seek medical a	n. In case of an emergency in which I as parent/guardian cannot be attention for him/her in my absence.
Signature of Parent/Guardian:	Date: