

MEXICO MISSION 2008
GOOD SAMARITAN LUTHERAN CHURCH
6500 W. Flamingo Rd
Las Vegas, NV 89103
702-873-3589

RELEASE FORM

I understand the purpose of this trip to Mexico is for Christian Fellowship. I will not hold the church responsible beyond the coverage of health and accident insurance provided.

- For Youth Participant: In case of emergency, Don Lorfing, Dan Reese or their designee has my permission to take the necessary steps for the welfare of my child. While my child is on this trip, I can be reached at the phone number listed below.
- For Adult Participant: In case of emergency, Don Lrofing, Dan Reese or their designee has my permission to take the necessary steps for my welfare. While I am on this trip, another family member/friend can be reached at the phone number listed below. (Name: _____)

Name: _____

Address: _____

Home phone: _____ Cell phone: _____

Emergency contact info if different: _____

Email address (please print clearly!) _____

Last tetanus: _____ Ins. Co . card # _____

Any medical conditons? _____

Other comments: _____

Signature of Participant or Parent/Guardian

Printed name

Date: _____

INSTRUCTIONS: Return this form along with copy of insurance card (both sides) and check for \$75.00.

Be sure all checks have MEXICO prominently written on bottom left corner of any checks and/or on outside of envelope so the money is correctly attributed to you. Adults: if you are willing to drive a vehicle at any time on this trip, please also give a copy of your driver's license (both sides)

