

**Unitarian Universalist Church of Nashua  
Religious Education Overnight Permission Form**

Please fill out and return to RE Teacher.

I give my child, \_\_\_\_\_ permission to stay overnight with his/her RE  
Class \_\_ (Fill in Date) \_\_\_\_ at the Unitarian Universalist Church of Nashua.

Any exposure to contagious diseases within the past two weeks?

If yes, what? \_\_\_\_\_

Does your child sleepwalk or suffer from enuresis? \_\_\_\_\_

Should your child be restricted in any physical activities? \_\_\_\_\_

If yes, please explain \_\_\_\_\_

Will your child be bringing any medication? (Name and give reason)

\_\_\_\_\_

I understand that I am responsible for my child's transportation to the church Saturday at 5:00 p.m. and from church Sunday at 11:15 a.m. I also agree to pick my child up at the church if it becomes necessary at the teacher's request.

To my knowledge, my child is in good physical condition at this time. I shall make sure my child does not attend if he/she is not feeling well.

Any other information we should know? \_\_\_\_\_

Address of parent during event \_\_\_\_\_

Phone number \_\_\_\_\_

List another person who we might be able to contact in case of an emergency

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

I give permission for \_\_\_\_\_ (youth's name) to participate in a  
sleepover at the Nashua Unitarian Universalist Church on \_\_\_\_\_, 20\_\_\_. I further give  
permission for the adult leaders to authorize any emergency medical treatment for this youth,  
including surgery and/or anesthesia, in the event that I cannot be reached.

SIGNED \_\_\_\_\_ (parent, guardian, caregiver)