

Bethany Christian Schools

Student Visit Permission Form

To visit Bethany, register your child online at bethanycs.net or email/call the admissions office. Then bring this completed permission form on the day of the visit.

We are delighted to have your child visit Bethany. As with our own students, our number one concern is your child's health and safety while under our care. While we never expect an emergency to arise, it is important for us to have the following information to allow us to respond to situations appropriately and promptly, or to contact you, if necessary.

Date: _____

Student Visitor's Name: _____

Birthdate: _____ Current Grade: _____

Current School: _____

Parent/Guardian (please print): _____

Address: _____

Phone Numbers: (please indicate which number is best for immediate contact)

(work)

(cell)

(home)

Emergency Contact Person (if different from above): _____

(work)

(cell)

(home)

Provide below any other important information (such as allergies, medical conditions, or current medication) that we should know about to help us care for your child while s/he is visiting Bethany Christian Schools.

Please drop off any medications at the front office with the receptionist. Thank you.

I give permission for _____ to visit Bethany Christian Schools

name of visiting student

on _____—to be hosted by _____.

date of visit

name of Bethany host (if known)

Parent/guardian signature: _____