

The Starving 2 Serve Consent Form

Dear Parent/Guardian,

Your son/daughter _____ has shown an interest
(Place the name of the participant)

in participating in the Starving 2 Serve: 30 Hours and Beyond Event. They are to go without any solid food for 30 hours from **6p.m. on Thursday, April 24th , to Midnight on Saturday morning, April 26th , 2008.**

Participation means your child will:

1. Sign up Starving 2 Serve sponsors and collect money to help fund community projects in our local schools, shelters, and a variety of other areas in North County.
2. Miss three main meals.
3. Drink only water and juices during those 30 hours.
4. Bring receipts and money raised to Starving 2 Serve Celebration held at North Coast Church. **All those participating in Starving 2 Serve will gather at North Coast Church for an overnight event on Apr.25th at 6 p.m. to Apr.26th at 8:00 a.m.**

Before I issue a Sponsor Packet to your jr. higher, I would like your acknowledgment that you have no objections to such participation.

Thank You.

Travis Sybert
Jr. High Pastor
North Coast Church

I have no objection to my son/daughter participating in the Starving 2 Serve Event.

Signature of Parent or Guardian

STUDENT INFORMATION!!

Print CLEARLY!!

First & Last Name: _____

Address: _____
(City) (St) (Zip)

Phone Number: () _____

Email Address: _____