



GEORGIA DISTRICT YOUTH MINISTRIES

Pastoral Consent to Participate

Event: _____ *Hyphen Retreat* _____ *Teen Camp* _____ *Senior Camp* _____ *Extreme Weekend*

I am Participant's current Pastor or the Pastor's authorized signatory for purposes of this Agreement. I have advised the Participant of all Event rules and policies (the "Guidelines") and the obligation to follow them. The authorized signature below indicates that Pastor: (1) supports the Guidelines and will support the GDYM's enforcement of them; (2) consents to the GDYM's distribution of GDYM promotional materials directly to the Participant; and (3) recommends and approves the Participant to attend the Event.

Name of Participant (print): _____

Pastor's First & Last Name: _____ **Phone Number:** _____

Church Name: _____ **City:** _____ **State:** _____

Signature of Pastor or Pastor's Authorized Signatory: _____

Signed and dated this _____ day of _____, 20_____.

Pastor's Authorized Signatory Name (First/Last) (If applicable) _____

Title/Position: _____

Please return this Pastoral Consent Form in person upon checking at the campgrounds.