

Oneness Project Guardianship Release Form

Dear Parents or Guardians:

In the event that a person other than the parent or guardian of a child will be transporting a child to our Oneness Project event, we ask the parent or guardian to print, fill out, sign and return this form to the address at the bottom of the page. In addition to giving your permission for the person(s) named to bring your child, you acknowledge that the person(s) will be responsible for your child throughout the event.

Please make sure you complete a Medical Release Form also.

Thank you.

I give permission for my child, name _____, age _____, to be transported to the Oneness Project event in my absence by the person(s) named below. I have communicated to the person(s) named below that they are to be responsible for my child at all times when not in a scheduled Oneness Project planned activity.

Name of Event _____

Date _____

Temporary Guardian _____

Relationship _____

Address _____

City /State/Zip _____

Cell phone number _____

Home phone _____

Where guardian is staying during the event (hotel/cabin name, tent, etc.) :

Parent _____

Home Phone _____

Work Phone/Hours _____

Cell Phone _____

During Camp _____

Address _____

City/State/Zip _____

Effective Date: _____ to _____

Parent's Name (please print): _____

Parent Signature _____

Date _____

Please return this form two weeks prior to the event to:

Evie Fagergren, Registrar
Oneness Project
PO Box 2602
Olympia, WA 98507

* We are unable to accept participation of unaccompanied minor children without this signed form.