

**Dr. Paul Brashier**

Pastor  
Cell: 601-422-9544  
Office: 601-947-4875

*Rocky Creek Baptist Church*

**2165 Rocky Creek Road  
Lucedale, MS 39452  
601-947-4875**

**Mr. Mike Smith**

Director of Music  
Cell: 601-508-0851  
Office: 601-947-4875

**Rev. Caleb Howell**

Interim Student Minister  
Cell: 601-530-2337  
Office: 601-947-4875

**PERMISSION FORM  
GA Camp, Kid's Camp & Youth Camp**

My child, \_\_\_\_\_, has my permission to go with the leaders/volunteers from Rocky Creek Baptist Church, to \_\_\_\_\_ (specific camp).

My permission is also granted for Rocky Creek Baptist Church Staff Members, Volunteers, or Teachers to obtain necessary medical attention in case of sickness or injury.

I/We, the undersigned, do hereby release all staff/volunteers and Rocky Creek Baptist Church from any and all claims, demands, actions or cause of action, past, present, or future arising out of damage or injury while participation in the activities. I understand that Rocky Creek Baptist Church or chaperones will not be responsible in case of accident or injury. I agree to the above conditions when I sign below.

Parent/Guardian Signature: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Cell Phone Number or Phone Number Where I can be reached:

\_\_\_\_\_

Date: \_\_\_\_\_