

HIGHLAND UNITED METHODIST CHURCH
CHILDREN/YOUTH MINISTRY
PARENT/GUARDIAN RELEASE WAIVER

Name of child or youth ("student"): _____

Date of Birth: _____ Sex: _____ Grade: _____

Address: _____

Activity and Date: _____

As parent/legal guardian of the above student, I have reviewed the information about this children's/youth ministry activity. I give my permission for the student to be involved in the overall activity.

The child/student will abide by all rules set by the Church or its leaders for these activities. If the student is returned home early for discipline violations, it will be at my expense.

I agree that any video images, photographs, audio recordings, or any other visual or audio reproduction that may be taken of the student during this activity may be used, distributed, or shown as the Church sees fit, including use on the Church website.

I believe reasonable safety precautions will be taken by the Church and its agents during the events and activities. However, I understand the possibility of injuries, unforeseen hazards, and the inherent risks. I agree not to hold the Church, its employees, members, and volunteers liable for those possibilities and I release them from any damages, losses, diseases, or injuries incurred by the student. The designated Church leader for the activity is authorized to obtain any necessary emergency medical care for my child, at my expense.

I have discussed the importance of wearing a seat belt while in a vehicle with my child. In the event that he or she is to be transported to any location during this event, regardless of where they sit in the vehicle, my child has agreed to wear their seat belt. We understand that my child's failure to wear their seat belt may result in my having to pick them up or transport them myself.

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Name and Phone # (print): _____

Health Insurance Carrier & Policy #: _____