

2009-2010 PERMISSION

Heath Church of Christ

• 1331 Chapel Way • Heath, OH • 43056 • 740-522-8402

F. R. E. E. C. L. U. B.

Children's Ministry

BLANKET PERMISSION SLIP • June 2009 - May 2010 •

Name of Child _____ Birth Date: _____

Address: _____ City: _____ Zip: _____

Grade (09-10) : _____

Release Form for Minor(s)

The undersigned is the parent or legal guardian of the Minor(s) named above (hereinafter referred to as "Minor(s)"). The undersigned desires for said Minor(s) to attend an/or participate in ministries, events, programs, functions, and activities (hereinafter referred to as "Activity"), sponsored by, connected with, or related to **Heath Church of Christ** (hereinafter referred to as "Church").

I understand and acknowledge that Church will allow the Minor(s) to participate in any Church activity without releasing and holding the Church harmless from any liability arising out of the Minor(s) attendance and/or participation in that Activity, including the Minor(s) transportation to, during and from the Activity, if provided by the Church.

I have or will investigate all risks involved with the Minor(s) attendance and/or participation in any Activity, and further as the parent or legal guardian of said Minor(s) assume any and all risks of personal or bodily injury to said Minor(s) or property damages associated with said Activity.

By signing this document, on behalf of myself and the Minor(s), I hereby release and forever discharge the Church, its ministers, officers, directors and employees, agents and any parties volunteering on behalf of the Church from all claims, damages, costs or expenses of any kind arising out of or related to the Minor(s) attendance or participation in any Church Activity. I understand that this document is a full complete release of all claims for personal or bodily injury and property damage which the Minor(s) might sustain as the results of the Minor(s) attendance and/or participation in any Church Activity, regardless of the specific cause thereof, and I further understand that in the event of such personal or bodily injury to the Minor(s), or property damage, that I cannot seek, on behalf of the Minor(s) or myself, any type of recovery or reimbursement whatsoever from the Church or their ministers, officers, directors, employees, agents or any parties volunteering on behalf of the Church.

Print Name of Parent or Legal Guardian

Signature of Parent or Legal Guardian

Date

IN CASE OF EMERGENCY

Home #: (_____) - _____ - _____ Work #: (_____) - _____ - _____

Cell #: (_____) - _____ - _____ Emergency #: (_____) - _____ - _____



WRITTEN RELEASE

In the event of an emergency where medical treatment is required I give my permission to the church staff or sponsor to obtain the services of a licensed physician for the Minor(s) listed above. Please attempt to notify me immediately concerning any such emergency.

Print Name of Parent or Legal Guardian

Signature of Parent or Legal Guardian

Date

INSURANCE INFORMATION

Company Name: _____ Account #: _____

Allergies: _____

Comments or medical information: _____

