

PARENTAL CONSENT AND LIABILITY RELEASE FORM

for

North Lima Calvary United Methodist Church

P.O. Box 315
12062 South Avenue
North Lima, Ohio 44452
(330) 549-2588

Participant's Name _____ Age _____ Birthdate _____

Preferred Name _____ Home Church _____

School Name _____ Current Grade _____

Address _____

City/State/Zip _____

Parent/Guardian _____

Home Phone _____ Cell Phone _____

Work Phone _____ Email _____

Emergency Contacts (in case parent(s) or guardian(s) cannot be reached)

Name _____ Phone Number _____

Relationship to Participant _____

Name _____ Phone Number _____

Relationship to Participant _____

Is the Participant taking any medications that we should know about? Yes No

Does the Participant have any special conditions we should know about? (Epilepsy, Diabetes, etc)

Does the Participant have any allergies? Yes No

Any special "dietary" needs? Yes No

Are there any physical activities the Participant should not participate in?

Please list who can pick up your child from programs or events

(No one under 18 is allowed to pick up children without a Permission Consent form on file)

LIABILITY RELEASE: In consideration of North Lima Calvary United Methodist Church allowing the Participant to participate in children or youth ministry activities, we (I), the undersigned, do hereby release, forever discharge and agree to hold harmless North Lima Calvary United Methodist Church, its pastor, employees, volunteers and agents (collectively herein the "Church") from any and all liability, claims or demands for accidental personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the Participant while involved in the children/youth activities. We (I) the parents(s) or legal guardian(s) of this Participant hereby grant our (my) permission for the Participant to participate fully in youth ministry activities, including trips away from the church premises. Furthermore, we (I) [and on behalf of our (my) minor Participants(s)] hereby assume all risk of accidental personal injury, sickness, death, damage and expense as a result of participation in recreation and work activities involved therein.

The undersigned do(es) hereby give permission for our (my) child _____
(Participant) to attend and participate in North Lima Calvary United Methodist Church children or youth ministry activities, and events during the period _____ through _____.
Parent(s)/Guardian(s) signature _____
Date _____

MEDICAL TREATMENT PERMISSION: We (I) authorize an adult, in whose care the minor has been entrusted, to consent to any emergency x-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care, to be rendered to the minor under the general or special supervision and on the advice of any physician or dentist licensed under the provisions of the Medical Practice Act on the medical staff of a licensed hospital or emergency care facility. The undersigned shall be liable and agree(s) to pay all costs and expenses incurred in connection with such medical and dental service rendered to the aforementioned child or youth pursuant to this authorization.

Insurance Company _____ Policy/Group ID# _____
Hospital preference (if you have one) _____
Parent(s)/Guardian(s) signature _____
Date _____

PHOTO RELEASE: By my signature below and consent by checking Yes or No, permission is given for North Lima Calvary United Methodist Church, without further consideration or compensation, to use any photos taken of said child/youth during North Lima Calvary United Methodist Church activities. Such photos may be used in a variety of media outlets. The names and other identifying information of the children will NOT be disclosed. I understand that North Lima Calvary United Methodist Church remains the sole owner of such photographs and that no financial profit will be made by it or the photographers by my image without my (our)/ written consent.

Yes _____ No _____
Parent(s)/Guardian(s) signature _____
Date _____

TRANSPORTATION PERMISSION: The undersigned does also hereby give permission for our (my) child/youth to ride in any vehicle driven by an approved ADULT chaperone while attending and participating in activities sponsored by North Lima Calvary United Methodist Church. My child/youth and I understand that SEAT BELTS SHALL BE WORN AT ALL TIMES during transportation.

Parent(s)/Guardian(s) signature _____
Date _____