

First Presbyterian Church of Canyon, Texas
Release Form
August 31, 2011 ~ April 18, 2012

During the year there will be events scheduled that your child/youth may be involved in. To insure that all the paper work has been completed and returned to the church prior to any of these events, we ask that you complete, sign and return this release form to the church office. This release will cover any and/or all church sponsored events for the current year, whether they are held at the church or away from the church. Prior to each event, details of the activity, times, the adult sponsors, the cost (if any) and transportation arrangements will be provided. If you have any questions about an event please contact Paige Nester, DCE, at the church (655-7087).

Thank you!

Child's Name: _____

Address: _____

Phone #: _____

Date of Birth: _____ **Age:** _____ **Grade:** _____

Parent(s) Name: _____

Parent(s) Alternate Phone #(s): _____

E-Mail Address(s): _____

Alternate Contact: _____ **Relationship:** _____

Alternate Contact Phone #(s): _____

I hereby certify that I am the legal guardian of the above named child and I hereby grant permission for him/her to participate in all church related activities of the First Presbyterian Church of Canyon, Texas. I hereby grant permission to transport him/her while participating in all church related activities of the First Presbyterian Church.

I do hereby release from all liability and covenant not to sue and do hereby agree to hold harmless and indemnify First Presbyterian Church and its representatives from any and/or all claims of injury or illness, which may be sustained by my child. I authorize those representatives or their designee to select medical facilities and/or physician and authorize treatment for my child in the event that such treatment should become necessary. I further acknowledge that I am responsible for health insurance and/or payment of any and all expenses that may be incurred for said medical treatment for my child.

Known medical conditions or allergies: _____

Insurance Company: _____ **Policy/Group #:** _____

Physician: _____ **Physician's Phone #:** _____

Signature of parent or guardian **X** _____

The Parent/Guardian signature on this form also permits First Presbyterian Church of Canyon, Texas to use still photography and/or video originating from church events or contracted agents for promotional purposes to include, but not limited to, the web site, Face Book, television and various forms of visual print media.

Signature of parent or guardian **X** _____