

# WOODLANDS CHURCH

## Emergency Contact and Liability Release

As a parent/legal guardian of \_\_\_\_\_, I give permission for the subject of this release to be involved in the overall activities of Woodlands Church youth group that take place at the First Baptist Church of Crestline and the near vicinity.

I/We have reviewed the rules of the activities and agree that the subject of this release will abide them. I/We also acknowledge that if the subject of the release has to return home early for discipline violations, it will be at my/our expense.

I/We understand all reasonable safety precautions will be taken at all times by Woodlands Church and its agents during the events and activities. I/We authorize any treatment by an accredited hospital and/or physician deemed necessary for the subject of the release in case of an emergency. I/We understand the possibility of unforeseen hazards and know the inherent possibility of risk. I/We agree not to hold Woodlands Church, its leaders, employees, and volunteer staff liable for damages, losses, diseases, or injuries incurred by the subject of this form.

Parent/Guardian Name (Please Print).

Student Name

Parent/Guardian Signature

Date

Home Address/City/Zip

P.O. Box and Zip

(W) Phone #

(C) Phone #

Health/Medica Ins. Co.

Policy Number

Please list any allergies and/or medical conditions the subject of this release may have. Also, list any prescription medication he/she may be taking at this time.