

**Church Permission/Waiver Form
2020-2021**

Participant Information

Name of Student/Adult Participant _____ DOB ____/____/____
Parent/Guardian Name _____
Address _____
City _____ State _____ Zip _____
Home Phone _____ Cell Phone _____
Grade: _____ T-shirt Size _____

Medical/Health Insurance Information

Medical Doctor _____ Phone Number _____
Insurance Company _____
Policy Number _____
Insurance Company Phone Number _____
Any Medical Problems/Allergies/Medications

Other Medical/Dietary Information

Emergency Contact _____ Phone Number _____

Permission for Publicity

On occasion, Gulf Breeze Presbyterian Church takes photographs or makes an audio or videotape recording of children and/or adults involved in church/youth activities. I consent to the use of any such audio or visual record of the child named above or me, if I am participating, to be used, distributed or displayed as agents of the church see fit.

I give permission for publicity: _____

I do not give permission for publicity: _____

Permission/Waiver Form 2020-2021

Release of Liability for _____

By signing this waiver form, I grant permission for the child named above or I, if I am a participant, to participate in and engage in the 2020-2021 youth group events of Gulf Breeze Presbyterian Church. My child or I are physically and mentally able to participate in these activities, unless I have already discussed it with one of the leaders. I acknowledge that there are certain risks involved in said activities, and have discussed them with my child if necessary.

I release Gulf Breeze Presbyterian Church, its affiliates, volunteers, and employees of all responsibilities for any injuries, to body or property, which may occur to my child during the course of these activities, except for negligence. In the event of an emergency in which I or the alternate contact cannot be reached, I authorize the adult leaders to make medical decisions for my child, and to administer first aid, if deemed necessary.

I further agree to indemnify and hold harmless Gulf Breeze Presbyterian Church and its affiliates, volunteers, and employees of any and all claims arising from my child's or my participation in activities or as a result of injury or illness of my child or me during such activities, including but not limited to exercising any medical decisions or administering any first aid in the circumstances referred to above, except for negligence.

I represent that I am the participant, or parent/guardian of _____, who is under 18 years of age. I have read the Permission/Waiver Form and am fully in agreement with the contents thereof. I give permission for the child named above or I to fully participate in the activities of Gulf Breeze Presbyterian Church.

NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN

READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF GULF BREEZE PRESBYTERIAN CHURCH USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM _____ (name of released party or parties) IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND GULF BREEZE PRESBYTERIAN CHURCH HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

Signature of Participant or
Parent/Guardian _____ Date _____