

**APPENDIX C: CHILD AND YOUTH ACTIVITY RELEASE FORM**

Children/Youth will not be permitted to travel for activities without a signed permission form. By signing this form, parents/guardians are giving permission for their child to participate in and be transported for the noted activity, and are acknowledging the risks associated with travel and the participant(s) of the trip are assuming these risks.

I \_\_\_\_\_, the parent/guardian of \_\_\_\_\_  
("my child/teenager"), give permission for my child/teenager to attend the:

\_\_\_\_\_

Date of trip: \_\_\_\_\_ Departure Time: \_\_\_\_\_ Expected Return Time: \_\_\_\_\_

Health Card Number: \_\_\_\_\_ Expiry: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Other: \_\_\_\_\_

Medications, Allergies, Health Concerns? \_\_\_\_\_

Alternative Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

I waive any and all claims I may have against, and release all liability and agree not to sue, Pleasantville Baptist Church, its officers, employees, agents, volunteers, and representatives for any personal injury, paralysis, death, property damage, or any loss whatsoever sustained as a result of my child's participation in the activity, arising out of any cause whatsoever.

I agree to accept full responsibility, financially or otherwise, for any damage my child may do to the property of Pleasantville Baptist Church, properties visited on outing, other's personal property, or vehicles used for transportation.

Should an incident arise whereby my child requires medical attention, the person responsible for the church activity shall attempt to contact me in order to obtain my consent regarding all medical treatment to be carried out on my child. Should it not be possible to contact me, I hereby give my permission to the person responsible for the church activity to consent to any and all medical treatment for my child recommended as necessary by a physician. I agree to be liable for and to pay all costs incurred in connection with such medical attention.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_