## WINDSOR HILLS UNITED METHODIST CHURCH ROANOKE, VIRGINIA (Child/Youth) LIABILITY RELEASE AND PERMISSION FORM

Name (full legal):					🗆 Male 🗆 Female
Street Address:					
City:		Zip:	Phone:		
School:				Grade:	
Date of Birth://	Age:				
Parent(s)/Guardian(s) - w	ith whom the child r	esides:			
Parent(s):	arent(s):Guardian(s):				
<b>Emergency Contact Perso</b>	n: Phone:				
Relation to Child/Youth:					
Allergies/Special Medical	Conditions/Concern	s and/or needs:			

I understand that, in consideration for being accepted by Windsor Hills United Methodist Church for participation in any children's or youth activity, outing, trip or event, including transportation to/from such, approved or sponsored by Windsor Hills United Methodist Church, through December 31, 2018, the undersigned, on behalf of all parents and guardians, does hereby release, forever discharge, and agree to hold harmless Windsor Hills United Methodist Church and its staff, agents, servants, employees, volunteers, officers, boards, trustees, and members from any and all liability, claims or demands for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and/or the participant that occur while said person is participating in the above described outing, trip, event or activity, including recreational and work activities. The undersigned further hereby agrees to hold harmless and indemnify said Church and its staff, agents, servants, employees, volunteers, officers, boards, trustees, officers, boards, trustees, and members for any liability sustained by said acts of said participant, including expenses incurred attendant thereto. The undersigned agrees that information regarding medical needs/special concerns may be shared with staff and volunteers working directly or indirectly with the child/youth.

The undersigned further consents to the administration of first aid and/or doctor's care, or any other form of medical treatment necessitated by illness or injury that may require the same, including the administration of basic medications, e.g.: Tylenol, Advil, etc... In the event of the necessity of such care, or treatment as heretofore described, the undersigned agrees to hold harmless and indemnify said Church and its staff, agents, servants, employees, volunteers, officers, boards, trustees, and members, from any acts of malfeasance and/or failure to act on the part of those chosen to administer medical care on behalf of the participant.

The undersigned also gives permission for pictures and/or images to be taken of their child/youth. Such pictures/images may be used in Church and/or promotional literature at the discretion of said Church and its staff, agents, servants, employees, volunteers, officers, boards, trustees, and members. Permission is also granted for electronic communication with the above youth regarding activities, etc. This communication may include email, texting and social media outlets such as Facebook, etc.

If you would prefer your child's picture not be taken, please check the box below.

By signing this form, I acknowledge that my child will be expected to observe all rules and guidelines of conduct while attending activities. In the event of a repeated behavior problem, a staff member may contact the parent or guardian. In extreme cases, Windsor Hills United Methodist Church reserves the right to refuse attendance to activities.

Signature \_\_\_\_\_

Date \_\_\_\_\_

I \_\_\_\_\_\_ give permission for my child's photo/image to be used for promotional literature, on our social media sites, or within the church facility.

I \_\_\_\_\_\_ do not give permission for my child's phot/image to be used for promotional literature, on our social media sites, or within the church facility.