

Sky Kids Terms and Permission Form

I am the parent or legal guardian of the child I am registering, and hereby give my permission for my child to attend and fully participate at Sky Kids hosted by Trinity Church and Stanwich Church.

In the event my child is injured as a result of participation at Sky Kids, whether or not caused by the negligence (active or passive) of the activity or any employee or agent of Trinity Church or Stanwich Church, I agree that recourse for the payment of all hospital, medical, dental, transportation and related costs and expenses will be paid by me or my spouse, or by accident, hospital or medical insurance or any available benefit plan of mine or my spouse.

I hereby give my permission for my child to receive any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care under the general or special supervision of and upon the advice of or to be rendered by a licensed physician, surgeon, dentist and/or Emergency Medical Services provider. As parent or legal guardian, I am responsible for the health care decisions of my child and am authorized to consent to services to be rendered, and no other consent is required by law.

I acknowledge that participation at Sky Kids has inherent risks of injury and loss, and that other hazards or risks, inherent or otherwise, may be encountered. I agree to release and indemnify Trinity Church or Stanwich Church and their members, employees, and agents from any and all claims of injury or other loss or damage arising in whole or part from my child(ren)'s participation.

I consent to photographs, videos, and/or other visual or audio recordings that may be taken of my child during Sky Kids to be used, distributed, copied, published and/or shown for Trinity Church or Stanwich Church purposes.

By registering my child for Sky Kids, I certify that I have read and understood these terms and agree to them.