

Christ For All Nations Parental Consent Form January 1, 2020 to January 1, 2021

Child's Name Print: _____ Age: _____ Birth
Date: _____ Address: _____
City: _____ State: _____ Zip: _____ Insurance Company
Name: _____ Ins. Co Phone: _____ Policy
#: _____ Group
#: _____ Emergency Contact Name
Print: _____ Emergency
Contact Phone
#: _____

(Please list allergies, medical problems and other pertinent information on the back of this form)

To whom it may concern, the undersigned does hereby give permission for the above names child to attend and participate in activities sponsored by Christ For All Nations. I understand that in the event medical treatment is required for the above-named child, every effort will be made to contact me. However, if I cannot be reached, I authorize an adult in whose care the minor has been entrusted to consent to any x-ray, examination, anesthetic, medical, surgical or dental diagnosis or treatment, and hospital care to be rendered to the minor under the general supervision and on the advice of any physician or dentist licensed under the provisions of the Medical Practice Act or the medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital. The undersigned shall be liable and agrees to pay all costs and expenses incurred about such medical and dental services rendered to the aforementioned child pursuant to this authorization. Should it be necessary for my child to return home due to medical reasons or otherwise, the undersigned shall assume all transportation costs. The undersigned does also hereby give permission for my child to ride in any vehicle designated by the adult in whose care the minor has been entrusted while attending and participating in activities sponsored by Christ For All Nations.

Parent/Guardian
Signature: X _____ Date: _____
Parent/Guardian Name
Printed: _____

Release of Claims

Activity: Christ For All Nations Activities "Activity")

I certify that I am cognizant of the inherent dangers associated with participation in the Activity and with the fact that participating in the Activity may take place outside of, or off the missons premises.

I understand and agree that neither Christ For All Nations, nor its trustees, board, representatives, instructors, or agents may be held liable in any away for any occurrence about my child's participating in the Activity which may result in injury, harm or other damages to me or my family.

As part of the consideration for being allowed to enroll and participate in the Activity, I hereby personally assume all risks about my child's participation in the Activity. I further release Christ For All Nations, its board, ministers, teachers and representatives for any injury or damage which may befall my child while my child is enrolled in or participation in the Activity. I further agree to save and hold harmless Christ For All Nations, its board, ministers, teachers, and representatives from any claim by me or my family, estate, heirs or assigns arising out of my child's enrollment and participation in the Activity. I also authorize Christ For All Nations to render or obtain such emergency medical care or treatment as may be necessary should any injury, harm or accident occur to my child while participating in the Activity.

I further state that I am of lawful age and legally competent to sign this affirmation and release; that I understand the terms herein are contractual and not a mere recital; and that I signed this document of my own free act and volition. I further state and acknowledge that I have fully informed myself of the contents of this affirmation and release by reading it before I have signed it.

I also understand that in the event my child becomes a discipline problem, he/she will be sent home at my expense and will forfeit all moneys paid.

Parent/Guardian
Signature: X _____ Date: _____
Parent/Guardian Name

Printed: _____

Photography Release

As a parent or guardian of this child, I hereby consent to the use of photographs/videotape or images taken in association with Christ For All Nations for publicity, promotional and/or educational purposes (including publications, presentation or broadcast via newspaper, internet or other media sources).

_____ Yes, I give consent to use an image of my child as affiliated with events associated with Christ For All Nations

_____ No, I do not authorize the use of an image of my child as affiliated with events associated with Christ For All Nations

Parent/Guardian
Signature: X _____ Date: _____

Parent/Guardian Name
Printed: _____