

# FIRST BAPTIST CHURCH ACTIVITIES CONSENT FORM

Name of child \_\_\_\_\_ Birth date \_\_\_\_\_

Name of parent/guardian(s) \_\_\_\_\_

Address \_\_\_\_\_

Parent/Guardian phone(s): \_\_\_\_\_

Emergency contact(s) w/numbers: \_\_\_\_\_

I, the undersigned, being the parent or legal guardian of the child named above, do hereby consent to the participation of my child in the activities of First Baptist Church.

I give my permission to take said participant to a doctor or hospital and hereby authorize medical treatment, including but not in limitation to emergency surgery or medical treatment, and assume the responsibility of all medical bills, if any. Further, should it be necessary for the participant to return home due to medical reasons, disciplinary action or otherwise, I hereby assume all transportation costs.

I hereby release, forever discharge and agree to hold harmless First Baptist Church and the directors thereof 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 the child participant that occur while said child is participating in ministry activities of First Baptist Church. I hereby assume all risk of personal injury, sickness, death, damage and expense as a result of participation in recreation and work activities involved therein. Further, authorization and permission is hereby given to said church to furnish any necessary transportation, food and lodging for this participant.

Note to Parent: If giving consent for one activity only, or if this consent is otherwise restricted, please specify:

\_\_\_\_\_

## **MEDICAL INFORMATION**

Family Doctor: \_\_\_\_\_ Doctor's Telephone: \_\_\_\_\_

Insurance Co.: \_\_\_\_\_ Policy No.: \_\_\_\_\_

Is there any medical condition or medications that your child has that we need to be aware of?

\_\_\_\_\_

## **MEDIA RELEASE**

I, the undersigned, do hereby grant or deny permission to First Baptist Church to use the image of my child as marked by my selection below. Such use includes photographs, digital images and/or video taken of my child for use in printed materials such as brochures and newsletters, and digital media such as promotional videos or on web presences maintained by First Baptist Church.

Deny permission to use my image or my child's image at all.

Grant permission to use my image or my child's image.

Signature of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_