

Student Ministry Permission & Registration

In consideration of my child participating in Youth Ministry activities sponsored through Faith Evangelical Free Church, Inc., I/We Parents and Natural Guardians of

(Name of Child)

authorize my child to participate and attend Faith Church Youth Group Activities in the OH, KY and IN areas in 2009-2010.

I understand that transportation and supervision will be provided by the Youth Ministry of the Church in conjunction with volunteers who may or may not be members of the Church, using vans, private vehicles and/or chartered transportation.

Special Needs: I am advising the Youth Ministry that my child has special needs or requires the supervised administration of medicine as follows:

(Describe Requirements in Detail)

I/We, understand that there is risk associated with any youth activity which could cause serious injury, paralysis or even death to my child and I/We the undersigned hereby release, acquit and forever discharge Faith Evangelical Free Church, the Youth Ministries, its Ministers, supervisors, employees, agents and volunteers from any and all potential and actual injury and damages that my child may sustain while participating in the Youth Ministry activity described herein.

I/We further understand and agree that we will hold harmless and indemnify Faith Evangelical Free Church, the Youth Ministries, its Ministers, supervisors, employees, agents and volunteers from any all suits, claims, demands, causes of action and subrogation claims whatsoever, whether known or unknown, whether foreseen or unforeseen which may arise out of said activity described herein.

I/We understand that this is a binding release and is binding upon my/our heirs and assigns.

I/We further authorize any emergency or medical treatment that may be necessary to aide and assist my child in the event of any injury. I hereby request that the Youth Ministry notify I/We at the following phone number(s)

Home: _____ **Office:** _____ **Cell:** _____

Caution: *By signing this authorization and release, I/We understand that I/We are giving up certain parental rights to claim damages and to bring suit against Faith Evangelical Free Church.*

Parent/Natural Guardian

Date

(Father)

Date

(Mother)