# Parental/Participant Consent & Release Form 2019-2020 Youth Events

We're so glad you're participating in youth events at Country Club Christian Church! Fill out the information below and sign the other side of this page so that we have everything we need and legal matters covered for your involvement. With questions, contact Rev. Tyler Heston, Minister to Youth, at tylerh@cccckc.org.



Youth Name:		Gender:	
School:			
Grade (2019-20)	Birthdate:		
Email Address:	Cell Phone:		
Address:	City/State/Zip:		

Parent/Guardian 1 Name:	Ge	ender:	
Email Address:	Cell Phone:		
Address (if different):	City/State/Zip:		
Parent/Guardian 2 Name:	Ger	nder:	
Email Address:	Cell Phone:		
Address (if different):	City/State/Zip:		

We send out weekly email newsletters and other occasional updates via text and email. If you'd like to sign up to receive these, circle "yes" for each person. You can always sign up for texting reminders online at remind.com/join/ccccyo.

<u>Sign me up for</u>	<u>Youth</u>	<u>Parent/Guardian1</u>	<u>Parent/Guardian 2</u>
Texting updates:	yes/no	yes/no	yes/no
Email updates:	yes/no	yes/no	yes/no

Emergency Contacts If you'd like to use someone other than the parents/guardians, list them below.

	<u>Name &amp; Re</u>	lationship <u>Phone Number</u>	<u>p</u> <u>Phone Number</u>
1			
2			
Medi	cal Insurance	Mark here if none:	
Comp	bany Name		
Policy	/ Number:	Group Number:	Group Number:
ΔΙΙστί	nies medications special medical ne		

medications, special medical needs, and dietary restrictions:

## I. Permission to Participate in Activity

To whom it may concern:

### II. Consent for Medical Care & Treatment

The undersigned authorizes 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, on an emergency or nonemergency basis, to be rendered to the minor under the general or special supervision and on the advice of any licensed physician or dentist on 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 agree(s) to pay all costs and expense incurred in connection with such medical and dental services rendered to the aforementioned child pursuant to this authorization.

Should it be necessary for our (my) child to return home due to medical reasons or otherwise, the undersigned shall assume all transportation cost.

#### III. Release

In consideration for being accepted by Country Club Christian Church for participation for the above-referenced trip or activity and in consideration of the value of the services rendered or to be rendered and for other good and valuable consideration, the undersigned, being 21 years of age or older, does for myself and for and on behalf of my child-participant if said child is now 21 years of age or older hereby release, forever discharge and agree to hold harmless Country Club Christian Church, its directors, officers, agents representatives, and employees 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 or the child-participant that occur while said child is participating in the above-described trip or activity, including but not limited to any claims, causes of actions, demands or liability for negligence.

Furthermore, the undersigned hereby assumes all risk of personal injury, sickness, death, damage and expense as a result of participation in the 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. The undersigned does also hereby give permission for the child-participant to ride in any vehicle designated by the adult in whose care said child has been entrusted while attending and participating in activities sponsored by Country Club Christian Church.

The undersigned further hereby agrees to hold harmless and indemnify said church, its directors, employees and agents, for any liability sustained by said church as a result of the negligent, willful or intentional acts of the said participant, including expenses incurred attendant thereto.

Only participant need sign if 21 years of age or older. If under the age of 21, both parents must sign unless parents are legally separated or divorced in which case the custodial parent must sign.

Parent/Guardian1	Date
Parent/Guardian 2	Date

#### Youth Participant Only

I have read the foregoing and understand the rules of conduct for participants and will abide by them as well as the directions of the leadership of the trip.

Participant

**Photography Privacy:** Parents, please initial only if you do <u>NOT</u> give permission for Country Club Christian Church to use individual or small group pictures of your child for Country Club Christian Church presentations and publicity. Pictures are used in our church newsletters, websites, flyers, and presentations. Pictures of individuals are not shared with other organizations without additional permission.

For office use only:

Scanned? \_\_\_\_ Entered into F1? \_\_\_\_ Updated text/email? \_\_\_\_ Notes: \_\_\_\_

Date