## FIRST BAPTIST CHURCH OF PINEHURST LIABILITY WAIVER

## TO BE READ AND SIGNED BY PARENT OR GUARDIAN

I understand that my child must be healthy and reasonably fit in order to safely participate in First Baptist Church activities and that I will inform the program leader(s) of any medication, ailment, condition, or injury that may affect his/her ability to participate safely.

#### MEDICAL EMERGENCY PARENTAL PERMISSION\*

If an injury or other medical condition occurs or arises, I hereby give permission to the FBCP staff or volunteer to provide routine health care and seek emergency treatment including x-rays or routine tests. I agree to the release of any record necessary for treatment, referral, billing or insurance purposes. I understand that I am financially responsible for charges and hereby guarantee full payment to the attending physicians or health care unit. In the event of an emergency where I cannot decide for my child, I give permission to the physician/hospital selected by the FBCP staff or volunteer to secure and administer treatment for my child, including hospitalization.

 initial date

**PFBC ASSUMPTION OF RISK AND RELEASE OF LIABILITY (*Please read carefully.*)**

I give permission for to participate in any of the First Baptist Church, Youth activities. I understand that these activities/events may involve certain risks of physical activity and possible injury and that First Baptist Church will provide each participant with reasonable care, but that FBCP cannot guarantee that my child will remain free of injury. I agree to RELEASE from LIABILITY, INDEMNIFY and HOLD HARMLESS the First Baptist Church of Pinehurst and any staff and volunteer leaders from any and all claim and/or cause of action arising out of and related to any illness, injury, loss, penalties, damage, settlement, costs or other expenses or liabilities that occur as a result of my child’s participation in program.

Parent or Guardian Signature Date

(Must be signed by the parent or guardian if the participant is under 18 years old)

**PHOTO RELEASE FORM**

By signing this form, I give First Baptist Church of Pinehurst the permission to photograph my child and use his or her picture for use on the church’s website or Facebook page. First Baptist Church of Pinehurst will never publish a child’s name with any of its publications.

Child’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_