



## Central Presbyterian Church

DELIBERATELY DIVERSE & FULLY INCLUSIVE

# Children and Youth Participation Release

Today's Date: \_\_\_\_\_

Participant's Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Phone: \_\_\_\_\_

Identifying Gender: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

### Functions and Activities:

It is my understanding that participating in the programs, recreational activities, and other activities of Central Presbyterian Church is a privilege. Prior to my child(ren)'s participation in such activities, I acknowledge that there are certain risks associated with the activities, including, by way of example, physical injury due to activity-related accidents, physical injury due to transportation-related accidents, illness, or even death.

In addition, I acknowledge that there may be other risks inherent in these activities of which I may not be presently aware.

Parent/Guardian Initials: \_\_\_\_\_

### Release of Liability:

By signing this Participation Release, I expressly warrant that the child(ren) named or I, if I am a participant, am capable of withstanding both the physical and mental demands of the activities discussed above. I also expressly assume all risks of the child(ren) or me participating in the activities, whether such risks are known or unknown to me at this time. I further release Central Presbyterian Church and its ministers, leaders, employees, volunteers, and agents from any claim that my child(ren) may have or that I may have against them as a result of injury or illness incurred during the course of participation in these activities. This release of liability shall include (without limitation) any claims of negligence or breach of warranty. This release of liability is also intended to cover all claims that members of the child's or my family or estate, heirs, representatives, or assigns may have against Central Presbyterian Church or its ministers, leaders, employees, volunteers, or agents.

Parent/Guardian Initials: \_\_\_\_\_

**Personal Property Loss or Damage Release:**

I further agree to indemnify and hold harmless Central Presbyterian Church and its ministers, leaders, employees, volunteers, or agents from any and all claims arising from my participation in its activities and programs, or as a result of my personal property damage or loss during such activities. I represent that I am the parent/guardian of the child(ren) named above, who is under 18 years of age or a participant in activities for children and youth at Central Presbyterian Church. I have fully read the above Participation Release and am fully familiar with the contents thereof.

Parent/Guardian Initials: \_\_\_\_\_

**Medical Release:**

Family Physician: \_\_\_\_\_

Phone: \_\_\_\_\_

Medical Insurance Company: \_\_\_\_\_

Group No. \_\_\_\_\_

Medical Insurance ID Number: \_\_\_\_\_

Phone: \_\_\_\_\_

Policy Holder: \_\_\_\_\_

**Emergency Contacts:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

Please list medications, allergies, dietary restrictions, and other pertinent health information:

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**First Aid and Emergency Medical Treatment:**

I recognize that there may be occasions where the child named above or I, if I am a participant, may be in need of first aid or emergency medical treatment as a result of an accident, illness, or other health condition or injury. I hereby give permission for agents of Central Presbyterian Church to seek and secure any needed medical attention or treatment for the child(ren) named above, or me if I am a participant, including hospitalization, if in the agent's opinion such need arises. In doing so, I agree to pay all fees and costs arising from this action to obtain medical treatment. I give permission for attending physician(s) and other medical personnel to administer any needed medical treatment, including CPR and other rescue procedures, surgery and, again, I agree to pay for the medical treatment. I also agree to notify agents of Central Presbyterian Church if there are any changes in the above information that I have submitted.

Parent/Guardian Initials: \_\_\_\_\_

**Publicity Release:**

On occasion, Central Presbyterian Church takes photographs or makes audio or video recordings of children and/or adults involved in church activities. Such photographs or recordings may be used by staff and participants to remember the activities and participants, and may be used in the church's publications, social media, or advertising materials to let others know about its ministry. Any public use of such recordings must be approved by the church. The church may also invite local news organizations to photograph or record our events for news reporting or special interest features.

I consent to the use of any such photograph or audio or video recording of my child(ren) named above or me, if I am participating, to be used, distributed, or displayed as agents of the church deem appropriate. Leave blank if no consent is given.

Parent/Guardian Initials: \_\_\_\_\_

## **Communication Release:**

On occasion, Central Presbyterian Church may wish to share information using social media platforms or send text messages in order to communicate with participants. I hereby authorize Youth Ministry Staff, who have been screened and vetted by Central Presbyterian Church, to communicate with my child(ren) or me, if I am the participant, using contact methods such as text messages, Facebook messages or other social media alerts regarding CPC Youth Ministry. Leave blank if no consent is given.

Parent/Guardian Initials: \_\_\_\_\_

**I have read this entire form and understand what I am signing.**

Parent/Guardian Signature: \_\_\_\_\_

## **Parent Participation**

I would be willing to serve as (Please Check all that apply):

- a Youth Leader
- a Lunch Angel
- as a driver when needed for children and youth
- as a Volunteer for Sunday School activities during Worship

Central Presbyterian Church's Safeguards Policy and the church's liability insurance carrier require us to complete background and driving checks for adult sponsors. If you are interested in volunteering directly in our Children & Youth Program, you will receive a background check release form from Lisa Korson, CPC's Office Manager. Once the check is complete, you will be able to begin participating in the program.

**Thank you for joining Central Presbyterian Church in our mission to provide excellent Children and Youth Ministry to our members!**

Robyn Greer  
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