

6th Grade Crossover 2019 Waiver

I (we) hereby give permission for my (our) child, _____, to attend and participate in 6th Grade Crossover 2019, August 8, 2019, sponsored by First Baptist Church Allen. I also give consent to medical and surgical treatment as needed in the judgment of the treating physician chosen by the representatives of First Baptist Church. I further give First Baptist Church and its representatives permission to transport my child at their discretion in case of an emergency. I do hereby agree to hold First Baptist Church, their agents and employees harmless of any and all liability, actions, causes of actions, claims, expenses and damages on account of injury to my child, property, even injury resulting in death, which I now have or which may arise in future connection with the activity or participation in any other associated activities. Lack of cooperation with event or church policies will result in my child returning home. I understand that going to 6th Grade Crossover 2019 means photos and videos of my child taken while at the event may be used in First Baptist Church publications.

I also understand that publication of these photographs may be accomplished electronically via the Internet/World Wide Web and that after publication, the Church will be unable to prevent persons from gaining access to the Internet/World Wide Web, copying my photographs and videos therefrom, and subsequently using, altering or republishing them without my consent. I waive any claim for damages against the Church from unconsented-to use, alteration or republication of my photographs and video by third parties accessing the Internet/World Wide Web.

Signature of Parent/Guardian _____

Phone H _____ W _____ C _____

In Case of Emergency Contact _____ Phone _____

Insurance Company _____

Insurance Phone: _____ Policy # _____

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| Name: | Completed Grade: | Age: |
| Parent Name: | Parent Cell Number: | |
| Paid Amount: | Cash/Check# | |
| Special Needs (Medical, Dietary, Allergies): | | |
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