



Christ Church School

Child/Youth General Release, Permission, Indemnification, and Medical Authorization Agreement

Valid August 1, 2010 to September 30, 2011

I understand Christ Church School is a not-for-profit school that sponsors various programs designed to minister to children and youth (hereinafter "Programs") and that precautions are taken to ensure that the Programs are conducted in a safe and responsible manner. However, I further understand that because of the nature of activities within the Programs in which I am enrolling my child/youth, - _____ (name of child) (hereinafter referred to as "Participant"), regardless of the supervision, there is a potential for injury during any activity.

In consideration for the Participant being accepted by Christ Church School for participation in the Christ Church School Programs, I do hereby release, indemnify, forever discharge and agree to hold harmless Christ Church United Methodist, Inc. and the Florida United Methodist Annual Conference, their officers, directors, employees, pastors, volunteers and successors and assigns (hereinafter referred to collectively as "Christ Church") 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 resulting in any way from or in any fashion arising from the minor Participant's participation in the Christ Church School Programs *whether caused in whole or in part by negligent acts or failure to act by Christ Church School, its agents, servants, employees, pastors, volunteers or otherwise.*

This release, indemnification agreement and waiver specifically includes, but is not limited to, any claim which might otherwise be brought on behalf of myself or the Participant for (a) negligence or negligent supervision by Christ Church School; (b) any injury or harm that may occur while the Participant is on the property owned or used by Christ Church School before, during or after the Program and (c) any negligent act or failure to act on the part of those chosen to administer emergency medical care to the Participant. I acknowledge by my signature below that I have carefully read this release and that I fully understand that this is a waiver of claim and release of liability of Christ Church School from any and all claims made by me, or on my behalf, or on behalf of the Participant minor child, *regardless of whether those claims are caused by the negligent acts or failure to act of Christ Church School, its agents, servants, employees, pastors or volunteers.*

By my signature below, it is my understanding that the School will attempt to notify me in case of a medical emergency involving my child/youth, but if the School cannot reach me, I consent to the administration of first-aid and/or doctor's care or any form of medical treatment necessitated by illness or injury for the minor Participant and I agree that I will pay for any medical expenses incurred.

Christ Church is granted permission to use any individual or group photograph taken at the event showing my child for publicity or brochure purposes.

Print Child/Youth Name _____ **Grade** _____ **Age** _____

Insurance Company _____

Policy Number _____

Parents/Legal Guardian Printed Name _____

Telephone: Home _____ **Work** _____ **Cell** _____

Parent/Legal Guardian Signature _____ **Date** _____

Notary Signature _____ **Date** _____

Notary Stamp

