ALL SAINTS' EPISCOPAL CHURCH
PARENTAL CONSENT FORM-YOUTH LOCK IN 1/20-21/2012

(please print legibly)

Youth Name _____ *Age*_____ *Birthday*_____

*Address*_____ *City* _____ *State* _____ *Zip* _____

Home Phone_____ Grade _____E-mail address _____

Parent Phone Contacts: _____ _____ _____ _____

circle: (business. • cell) (business. • cell) (business. • cell) (business. • cell)

LIABILITY RELEASE (Release of All Claims)

In consideration for being accepted as a participant in ***All Saints' Episcopal Church*** activities ***from 6:30 PM January 20, 2012 through 8:00 AM January 21, 2012*** we (I), being 21 years of age or older, do hereby release, forever discharge and agree to hold harmless ***All Saints' Episcopal Church*** and its agents, employees, directors, and anyone acting on its behalf 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 and the child-participant that occur while said child is participating in activities sponsored by or in any way related to **All Saints' Episcopal Church**. This includes, but is not limited to, any activity on the property of ***All Saints' Episcopal Church*** and all off site activities connected ***with All Saints' Episcopal Church*** Furthermore, we (I) hereby assume all risk of personal injury, sickness, death, damage and expense as a result of participation in any activity recreation and work activities involved therein. We (I) understand that there are risks of injury associated with the activities my child-participant is going to be engaged in, and we (I) , with knowledge of those risks, agree that no claim, suit or demand of any kind will be made against ***All Saints' Episcopal Church .*** This includes, but is not limited to, those claims, suits, or demands arising out of the negligence of ***All Saints' Episcopal Church*** and its agents, employees, directors, and anyone acting on its behalf. Further, should it be necessary for the participant to return home due to medical reasons, disciplinary action or otherwise, we (I) hereby assume all transportation costs. Further authorization and permission is hereby given to said church to furnish any necessary transportation, food and lodging for this participant. The undersigned further hereby agree to hold harmless and indemnify said church, its directors, employees and agents, for any liability sustained by said church as the result of the negligent, willful or intentional acts of said participant, including expenses incurred attendant thereto.

MEDICAL AUTHORIZATION

We (I) hereby give our (my) permission to take said participant to a doctor or hospital and hereby authorize medical treatment, including but not limited to emergency surgery or medical treatment, rendered to the minor under the general or special supervision and on the advice of any physician or dentist licensed under the provisions of the Medical Practice Act 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 expenses incurred in connection with such medical and dental services rendered to the aforementioned child pursuant to this authorization.

Physician's Name _____ **Physician's Phone** _____

Medical Insurance Provider _____ **Policy Number** _____

Additional Emergency Contacts: _____ _____ _____

name *relationship* *phone number*

_____ _____ _____

name *relationship* *phone number*

PLEASE LIST ALL ALLERGIES AND / OR SPECIAL MEDICAL CONDITIONS:

_____

_____

PUBLICATION AUTHORIZATION

We (I) hereby give our (my) permission to use said participant's photographic likeness and first name in communication and marketing materials of ***All Saints' Episcopal Church*** , including but not limited to the website, brochures, newsletter, and bulletin boards.

The *undersigned hereby give permission for my (our) child, named above, to attend and participate in activities sponsored by* ***All Saints' Episcopal Church*** *from January 20, 2012 through January 21, 2012. I (we) also give permission for my (our) child to ride in any vehicle* ***All Saints' Episcopal Church*** *designated by the adult in whose care the minor has been entrusted while attending and participating in activities sponsored by* ***All Saints' Episcopal Church .***

_____ _____ ***or*** _____ _____

Father's signature **date** **Legal Guardian's signature** **date**

_____ _____

Mother's signature **date**