

## LRBC Release Form

*(required by parent/guardian for students under 18)*

Student Name \_\_\_\_\_ Parent Phone \_\_\_\_\_

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

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

I, the undersigned parent or legal guardian of the child named above, do hereby grant my permission and consent for the said child to attend and participate in in the activities/events of LRBC Preschool, both on and off church grounds, including the necessary transportation to and from these events and activities.

Permission is granted for my child to receive medical care if:

- Such care is deemed necessary by the persons in charge of the event
- Proposed medical treatment or procedures are immediately or imminently necessary and any delay occasioned by attempt to gain parental consent would reasonably jeopardize the life, health, or well-being of the child affected
- I cannot be personally contacted.

I further agree not to hold LRBC or any of its paid staff or volunteers responsible for any accident that may occur on the way to, from, or during an event. I indemnify, defend and hold harmless LRBC for all claims made and liabilities assessed against them as a result of any event or activity. I release LRBC and all medical providers from liability in acting on my behalf in this regard and rendering such medical treatment. I assume the risk and financial responsibility for any injury resulting from any event or activity.

In addition, I understand and assume the expenses of any property damage caused by my child. Should it be necessary that my child be returned home due to disciplinary action (when on trips), I will be contacted by the leaders and will be responsible to pick up my child and assume the cost of transportation.

By signing below, I am acknowledging that I have read through and understand the above statements.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date