

PARKERS LAKE BAPTIST CHURCH
PLBC Kids 4 Truth Registration/Medical Release Form

Circle Your Choice

Rookies Basketball Football Soccer Volleyball

Name	Age	Grade	Birthday
Address	Home Phone		
City, State, Zip	Cell Phone		
Parent Names	Email		
Emergency Contact Name and Phone Number			
Allergy/Health Issues	Home Church		

We realize that no activity is without the possibility of unforeseen hazards that could result in injury to an individual. As a parent or guardian, you are to be aware of your responsibility to instruct your child/children of the importance of conduct that will ensure a safe and enjoyable time while participating in this activity.

By signing this form, you, as a parent, guardian, or other responsible party, agree to assume the risks and hazards that are inherent in this kind of activity. You also agree to absolve and hold harmless Parkers Lake Baptist Church and their representatives for damages, loss, or injuries to the child/children for whom you sign.

"I give my child/children permission to participate in this activity and give my permission to the leaders of this function to authorize any treatment deemed necessary by a licensed physician due to accident or illness during this activity.

I give permission to have my child/children photographed with the potential for pictures to be posted on any Parkers Lake Baptist Church website or social media sites.

I understand the risks associated with Covid-19, and am also aware of the Centers for Disease Control and Prevention ("CDC") guidelines for it;

I acknowledge that the facts and circumstances surrounding Covid-19, as well as the CDC guidelines, have changed, and may continue to change, on a regular basis. I agree to be aware of any and all changes to those guidelines and to adhere to them;

I understand that there still may be risks associated with Covid-19 that are not yet known;

I understand that Parkers Lake Baptist Church cannot be expected to prevent me or my child's exposure to the risks, known or unknown, associated with Covid-19; and in spite of all the risks, known and unknown, associated with Covid-19, I, on behalf of myself and my child, voluntarily agree to attend and participate in PLBC Sports Camp

I give my permission to allow PLBC Sports Camp staff volunteers to assist my child/children (if necessary due to the child's age) with the restroom."

Parent/Guardian Signature: _____ Date: _____