Youth and Children Activity Permission Waiver/Release of Liability Form 2022 Vacation Bible School

Centre Presbyterian Church, 83 New Park Rd., New Park, PA 17352

Student's Name:		Date of Birth:	
Parent(s)/Legal Guardiar	n(s)Names:		
Home Phone:	Cell:	Work:	
Permission : I give my permission for my student.		, to attend Vac	ation Bible

School June 27 – July 1, 2022, sponsored by Centre Presbyterian Church, New Park, PA.

Waiver and Consent to Medical Treatment

I, the undersigned parent/legal guardian of named student, do hereby grant my permission and consent for said student to receive emergency medical care if:

1) Such care is deemed necessary by the adult supervisor having custody of my student.

2) The proposed medical treatment or procedures are immediately or imminently necessary and any delay occasioned by an attempt to obtain my personal consent would reasonably jeopardize the life, health, or well being of the student affected.

3) I cannot be personally contacted.

I agree to pay all fees and costs arising from this action to obtain medical treatment.

Release of Liability

By signing this permission/ waiver form, I expressly warrant that the student named above is capable of withstanding the physical demands of activities discussed above. I also expressly assume all risks of the student or me participating in the activities, whether such risks are known or unknown to me at this time. I further release Centre Presbyterian Church, New Park, Pa as well as the Presbyterian Church (USA) and its ministers, leaders, employees, and volunteers. I further agree to indemnify and hold harmless Centre Presbyterian Church, New Park, Pa as well as the Presbyterian Church(USA) and its ministers, leaders, employees, and volunteers from any and all claims arising from my participation in its activities and programs, loss of material possessions, or as a result of injury or illness of my student during such activities.

Signature of Parent Legal Guardian:

Date_____