
**PARENTAL CONSENT STATEMENT FORM
MURRYSVILLE ALLIANCE CHURCH**

I hereby consent to let my child, _____,
Student Name
participate in the following event:

Name of Event

It is understood that every precaution will be taken for the safety and well-being of my child, but in the event of an accident or sickness, Murrysville Alliance Church, its staff and its volunteers are hereby released from any liability.

Signature: _____ **Date:** _____

Printed Name: _____

Phone: (_____) _____ - _____

Address: _____
