

# JOHN KNOX PRESBYTERIAN ACTIVITY WAIVER

The undersigned parent/legal guardian hereby gives permission to \_\_\_\_\_ Church, for my child (insert child's name) \_\_\_\_\_ to take part in the following activity \_\_\_\_\_.

Should my child require immediate or emergency medical care while engaged in an activity sponsored by the Church, in my absence, I hereby grant the Church authority to release my child for medical treatment to such medical personnel as the Church determines appropriate under the circumstances.

**In consideration for the privilege of allowing my child to participate in the above-named activity, I agree to release and hold harmless the Church, its officers and agents, from any liability to or responsibility for bodily injury, damage or illness to the above-identified child while participating in any youth athletic or social activity which may be directly or indirectly sponsored by the Church. Further, I agree to indemnify and hold harmless the Church, its officers and agents with respect to any claim asserted by or on behalf of my child as a result of bodily injury, illness, or damage.**

Child (ren)'s Allergies:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE READ CAREFULLY, THIS PERMISSION SLIP IS A LEGAL DOCUMENT WHICH INCLUDES A RELEASE OF LIABILITY AND INDEMNIFICATION**

\_\_\_\_\_ Date \_\_\_\_\_ Signature of Parent or Legal Guardian  
Telephone number(s): Home: \_\_\_\_\_  
Work: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Emergency Number: \_\_\_\_\_

Special instructions or medical conditions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**The above signed parent or legal guardian has the following form of health/accident insurance covering the child:**

\_\_\_\_\_ Company \_\_\_\_\_ Member Number