

MINISTRY ACTIVITY CONSENT AND RELEASE FORM

I the undersigned parent or guardian, hereby consent to my child(ren) listed below to participate in the programs and activities sponsored by Emmanuel Missionary Baptist Church Childrens Ministries. These activities include but are not limited to Sunday School, AWANA, Bus Ministry, and VBS. I certify that my child is able to participate in these activities.

| CHILDS NAME | GRADE | BIRTH DATE | AGE | GENDER |
|-------------|-------|------------|-----|--------|
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If my child has medical conditions that may be relevant to a physician in the event of an emergency, I have listed them below. In the event an emergency occurs, I may be reached at the telephone number listed below. If I cannot be reached, I hereby authorize the childrens ministry workers to make emergency medical decisions for my child. If there are any activities I do not want my child to be involved in, I have listed them below.

I UNDERSTAND AND HEREBY AGREE TO ASSUME ALL OF THE RISKS WHICH MAY BE ENCOUNTERED ON SAID ACTIVITY, INCLUDING ACTIVITIES PRELIMINARY AND SUBSEQUENT THERETO. I do hereby agree to hold Emmanuel Missionary Baptist Church and its volunteers and employees, harmless from any and all liability, actions, causes of actions, claims, expenses, and damages on account of injury to my child or property which I now have or which may arise in the future in connection with the activity or participation in any other associated activities.

I expressly agree that this release, waiver, and indemnity agreement is intended to be broad and inclusive as permitted by the law of the State of Michigan and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This release contains the entire agreement between the parties hereto and the terms of this release are contractual and not a mere recital.

I understand that riding the bus/van is a privilege and is conditional upon the good conduct of those listed below. I also understand that no child may ride the bus without a permission slip signed by a parent or legal guardian.

I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT. This is a legally binding agreement that I have read and understand.

| Parent or Guardian | Date |
|--------------------|------|

| ALLERGIES OR MEDICAL CONDITIONS TO BE AWARE OF: | | | |
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| ACTIVITIES MY CHILD(REN) SHOULD NOT PARTIC | CIPATE IN: | | |
| | | | |
| TELEPHONE NUMBERS WHERE I MAY BE REACH | ED IN AN EMERGENCY: | | |
| Primary Contact Name | Phone Number | | |
| Alternate Contact Name | Phone Number | | |
| Home Address | | | |
| City: | ZIP: | | |
| EMAIL: | | | |
| Who is authorized to pick up your child on a wed allowing your child to ride one of our busses, ple | ekly basis? Must be 18 years old or older. (If you are ease state <u>EMBC Bus</u> below): | | |
| | | | |
| Photo Release: | | | |
| authorize the release, publication, dissemination photographs/videos taken of my (our) child(ren employee or representative of Emmanuel Missie | r) minor child(ren) listed above do hereby consent and n, distribution, use and/or reproduction of any and all) during EMBC Childrens Ministry activities by an onary Baptist Church. The photographs/videos will be ard display, event video, classroom bulletin board, socia | | |
| Parent/Guardian Signature | Date | | |

Form is valid for one year from date of parent/guardian's signature