

PARTICIPATION AGREEMENT AND RELEASE

Child 1 Name: _____ M / F Birth date: _____ Age: _____ Grade: _____

Allergies: _____ Other Information: _____

(any information you feel we need to know to better serve your child)

Circle all that apply: Children in Worship Kingdom Kids GEMS Cadets 78'rs b.y.g

Child 2 Name: _____ M / F Birth date: _____ Age: _____ Grade: _____

Allergies: _____ Other Information: _____

(any information you feel we need to know to better serve your child)

Circle all that apply: Children in Worship Kingdom Kids GEMS Cadets 78'rs b.y.g

Child 3 Name: _____ M / F Birth date: _____ Age: _____ Grade: _____

Allergies: _____ Other Information: _____

(any information you feel we need to know to better serve your child)

Circle all that apply: Children in Worship Kingdom Kids GEMS Cadets 78'rs b.y.g

Child 4 Name: _____ M / F Birth date: _____ Age: _____ Grade: _____

Allergies: _____ Other Information: _____

(any information you feel we need to know to better serve your child)

Circle all that apply: Children in Worship Kingdom Kids GEMS Cadets 78'rs b.y.g

Parent Info:

Parent 1 Name: _____ Home/ Cell Phone: _____ Texting: Y / N

Address: _____

Email: _____

Parent 2 Name: _____ Home/ Cell Phone: _____ Texting: Y / N

Address: _____

Email: _____

Medical Insurance:

Medical Insurance Company _____ Policy # _____

Phone number of Insurance Company _____

Pre-authorization phone number (if required) _____

Doctor's name: _____ Phone _____

Hospital preference: _____

Tetanus shot or booster received within last 7 years _____ yes _____ no

In Case of Emergency:

Emergency Contact: _____ Relationship to child: _____

(this is someone we would contact if we can't reach you) Best Phone Number: _____

Other adults/ families who may pick up my child:

1: _____ 3: _____

2: _____ 4: _____

Please see other side to complete form

Participation Agreement

I acknowledge that participation in the activity described above involves risk to the participant (and to the participant's parents or guardians, if the participant is a minor) and may result in various types of injury including, but not limited to, the following: sickness, bodily injury, death, emotional injury, personal injury, property damage, and financial damage.

In consideration for the opportunity to participate in the activity described above (the "activity"), the participant (or parent/ guardian if the participant is a minor) acknowledges and accepts the risks of injury associated with participation in and transportation to and from the activity. The participant (or parent/ guardian) accepts personal financial responsibility for any injury or other loss sustained during the activity, as well as for any medical treatment rendered to the participant that is authorized by the sponsor or its agents, employees, volunteers, or any other representatives (collectively referred to as the "activity sponsor"). Furthermore, the participant (or parent/ guardian) releases and promises to indemnify, defend, and hold harmless the activity sponsor for any injury arising directly or indirectly out of the described activity or transportation to and from the activity, whether such injury arises out of the negligence of the activity of the activity sponsor, the participant, or otherwise.

If a dispute over this agreement or any claim for damages arises, the participant (or parent/ guardian) agrees to resolve the matter through a mutually acceptable alternative dispute resolution process. If the participant (or parent/ guardian) and the activity sponsor cannot agree upon such a process, the dispute will be submitted to a three-member arbitration panel for resolution in accordance with the rules of the American Arbitration Association.

This Agreement is dated this _____ day of _____, _____ (year)

Participant	Participant	Parent
Participant	Participant	Parent

If child is under 18, then this agreement must also be signed guardian, parent and/or person with authority to release claims and indemnify Releases. (Approved by admin team: 8/16)

Photo Use Agreement

From time to time Brookside will publish photos of our events in our church newsletters, email updates, and much less frequently on our web page, Facebook page, or Instagram account. Your participation in our events constitutes your permission for us to publish photos that may include your child. If you have specific concern about this, please contact our church staff.

Transportation Release Form

I/we give permission for Brookside Christian Reformed Church to transport my child(ren), _____, _____, to and from ministry activities connected with Brookside CRC.

Parent Signature	Date	Parent Signature	Date
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