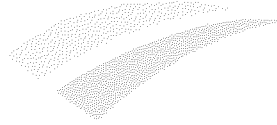


AWAKEN

TSUNAMI MINISTRIES FX 2016



Student Medical Release

Church Name: _____

Participant Name: _____

Emergency Contact & #: _____

Insurance Co. & Policy #: _____

I, _____, as the legal guardian of _____, give permission to him/her to participate in Tsunami Ministries FX2016. I will not hold Tsunami Ministries, Inc. or its staff, responsible for any mishaps that may occur to the above named participant, as a result of the participant's negligence. I understand that Tsunami Ministries and the staff will make every effort to provide my child with a safe experience. In the event of an accident, I grant permission to accompany him/her to obtain the necessary medical attention.

I also grant Tsunami Ministries permission to contact me, and my child's group leader to discuss any inappropriate, destructive or damaging behavior that may take place during the event. This may result in my child being asked to leave the event. **THESE ACTIONS DO NOT INCLUDE STRIKING OR BELITTling A CHILD.**

Should a participant fail to comply with the event rules, and continue to be a distraction to their group and other groups, I may be asked to come get my child. I also understand that the primary line of leadership for my child on this trip is his/her group leader.

Printed Name of Parent/Guardian

Date

Signature of Parent/Guardian: _____

Place Forms in Alphabetical Order and Turn In at Check-In