



TRINITY
PRESBYTERIAN
CHURCH

YOUTH ACTIVITY WAIVER

The undersigned parent/legal guardian hereby gives permission to Trinity Presbyterian Church for my child (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. Furthermore, I release Trinity Presbyterian Church, its officers, and agents from any liability which may arise from the giving of such authorization, it being my desire that my child be furnished with such medical or surgical services as soon as possible after the need arises.

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.

PLEASE READ CAREFULLY. THIS IS A LEGAL DOCUMENT
WHICH INCLUDES A RELEASE OF LIABILITY AND INDEMNIFICATION.

Date

Signature of Parent or Legal Guardian

Telephone numbers: Cell _____

Other _____

List any special instructions, medical conditions, allergies:

Health/accident insurance covering the child (company, numbers):