



## Parental Consent and Liability Release Form

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PARTICIPANT'S NAME \_\_\_\_\_ AGE \_\_\_\_\_ BIRTH DATE \_\_\_\_\_

PHONE \_\_\_\_\_ SCHOOL \_\_\_\_\_ GRADE \_\_\_\_\_

PARENT NAME(S) \_\_\_\_\_

PARENT CELL PHONE(S) \_\_\_\_\_ / \_\_\_\_\_

### TO WHOM IT MAY CONCERN:

The undersigned does hereby give permission for my child:

\_\_\_\_\_ ("Participant"), to attend and participate in **Community Church of Hudson** children/youth ministry activities, events, retreats and childcare during the period of \_\_\_\_\_ - \_\_\_\_\_.  
Month/Day/Year                      Month/Day/Year

**LIABILITY RELEASE:** In consideration of **Community Church of Hudson** allowing the Participant to participate in children/youth ministry (Sunday worship, Activities, Events) and childcare, I, the undersigned, do hereby release, forever discharge and agree to hold harmless **Community Church of Hudson**, its pastors, directors, employees, volunteers and teachers (collectively herein the "Church") from any and all liability, claims or demands for accidental personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the Participant while involved in the children/youth activities and childcare. I the parent or legal guardian of this Participant hereby grant my permission for the Participant to participate fully in children/youth ministry activities and child care, including trips away from the church premises.

Furthermore, I, on behalf of my minor Participant, hereby assume all risk of accidental personal injury, sickness, death, damage and expense as a result of participation in recreation and work activities involved therein.

Further, authorization and permission is hereby given to said Church to furnish any necessary transportation (within the limitations of church insurance and the law), food and lodging for this Participant. The undersigned further hereby agrees to hold harmless and indemnify said Church for any liability sustained by said Church as the result of the negligent, willful or intentional acts of said Participant, including expenses incurred attendant thereto.

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**MEDICAL TREATMENT PERMISSION:** I authorize an adult, in whose care the minor has been entrusted, to consent to any emergency x-ray examination, anesthetic, medical, surgical or dental diagnosis

