



EVANGEL

BAPTIST CHURCH

PERMISSION, RELEASE, AND WAIVER FORM

Activities during 2021

Student
Name(s): _____

Student
Address: _____

BY Initialing EACH ITEM BELOW I'M GIVING MY PERMISSION FOR THE ABOVE NAMED STUDENT TO JOIN THE YOUNG PEOPLE OF EVANGEL BAPTIST CHURCH AT EACH ACTIVITY I INDICATE:

___ **Freeze Out:** Campers will be transported by a bus, van or leader's vehicle to and from camp. While at camp they will be participating in camp activities and be under the authority of both their Evangel counselors and Lake Ann staff.

___ **Road Rally:** The teens will travel in groups from the church in a leader or parent vehicle to complete tasks listed on their sheet. They will arrive back at the church at the end. One adult leader or parent will supervise each group while completing tasks.

___ **Summer Camp:** The young people will be transported by a bus, van or leader's vehicle to and from camp. While at camp they will be participating in camp activities and be under the authority and protection of the Lake Ann camp staff.

___ **VBS/Community Service:** The teens will participate and help during Vacation Bible School and will travel to do community service and to an off-site fun activity on a bus, van or leader's vehicle. Youth staff will supervise all activities and work.

___ **Activity:** TBD

___ **Fall Fest:** The teens will be transported by bus, van or leader's vehicle to and from the location. They will participate in pumpkin carving, corn maze, hayride, and games. Youth leaders will be present to supervise all activities.

I state that my child is in proper physical condition to participate in the above event's activities. In consideration that my child has voluntarily agreed to participate in this event, I hereby, for myself, my heirs, executors, and administrators, successors, and assignees, release, forever discharge and hold Evangel Baptist Church the sponsor for this event, its agents, representatives, successors, and assignees, harmless from any and all claims for damages, injuries or sickness suffered by my child by his or her participation in the event.

Signature of Parent: _____

Printed name of Parent: _____

Date: _____ Emergency Phone #: _____