

Consent and Release Form for Church Activity

Adirondack Baptist Church

1431 State Highway 29
Gloversville, NY 12078
(518) 883-4125
Pastor Nathan Petersen

I, the undersigned parent(s), hereby consent to my child, _____, who is _____ years of age, participating in the activities connected with the “**Adirondack Kids Summer Dayz**” at **Adirondack Baptist Church**, an activity sponsored by **Adirondack Baptist Church** on the following date(s): **June 25th, July 2nd, July 9th, July 16th, July 23rd, July 30th, August 6th, August 13th, 2024** I understand that my child will be participating in the activity at the church from **9am-12pm**. I understand that this activity will include the following: **Bible teaching, snacks, crafts, physical games**. I certify that my child is able to participate in any and all of these activities. If my child has medical conditions which may be relevant to a physician in the event of an emergency, I have listed them below. In the event that an emergency occurs, I may be reached at the telephone number listed below. If I cannot be reached within a reasonable period of time, as determined by church officials, I hereby authorize the church or the adult sponsors at **Adirondack Kids Summer Dayz** to make emergency medical decisions for my child. If there are any activities that I do not want my child to be involved in, I have listed them below.

I UNDERSTAND AND HEREBY AGREE TO ASSUME ALL OF THE RISKS WHICH MAY BE ENCOUNTERED ON SAID ACTIVITIES, INCLUDING ACTIVITIES PRELIMINARY AND SUBSEQUENT THERETO. I do, for myself and for my child, heirs and assigns, hereby irrevocably and unconditionally release, acquit and forever discharge **Adirondack Baptist Church** and its agents, employees, and volunteers from any and all liability, actions, causes of actions, claims, expenses, obligations and damages of any nature whatsoever, which I now have or which may arise in the future, in connection with my child’s participation in the described activity or in any other associated activities including, but not, limit to, any injury to my child or property, even injury resulting in death.

I expressly agree that this release, waiver, and indemnity agreement is intended to be broad and inclusive as permitted by the law of the State of **New York** and that any portion hereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This release contains the entire agreement between the parties hereto.

I further grant **Adirondack Baptist Church** my permission to use the photographs or videos taken during this event for any legal use, including but not limited to: publicity, copyright purposes, illustration,

advertising, and web content. Furthermore, I understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

I further state that **I HAVE CAREFULLY READ AND UNDERSTAND THE FOREGOING RELEASE AND KNOW THE CONTENTS HEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT.** I understand that this is a legally binding agreement.

Medical conditions to be aware of:

Physical restrictions: _____

Instructions and medications: _____

Date of last tetanus or booster: _____

I do **not** wish my child to participate in the following:

Parent or Guardian

Parent or Guardian

Date

Date

Telephone numbers where I may be reached in an emergency:

People authorized to pick up my child(ren):