

# FIRST LUTHERAN CHURCH YOUTH ACTIVITY WAIVER

The undersigned parent/legal guardian hereby gives permission to First Lutheran Church, for my child (insert child's 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. 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.  
Child (ren)'s

Allergies / Health Concerns:

---

---

---

PLEASE READ CAREFULLY, THIS PERMISSION SLIP IS A LEGAL DOCUMENT WHICH INCLUDES A RELEASE OF LIABILITY AND INDEMNIFICATION

Date: \_\_\_\_\_ Signature of Parent / Legal Guardian\_\_\_\_\_

Telephone number(s): Home: (\_\_\_\_) \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_

Emergency Contact: Emergency Number: (\_\_\_\_) \_\_\_\_\_

Special instructions or medical conditions: The above signed parent or legal guardian has the following form of health/accident insurance covering the child: \_\_\_\_\_

---