

First Baptist Church of Winter Garden, Inc. Consent and Release Form For Church Activities

I, the undersigned parent or guardian, hereby grant consent for my child, _____, to participate in MIX Camp 2018 July 2-6. Pertinent details and description of this field trip may include transportation to and from the Lake Yale Baptist Conference Center, field games, meals, small group discussions, Worship, pool and beach swimming and other games, and Bible study. I have read the provided promotional sheet describing some further details of the activities of the week. 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 an emergency occurs, I may be reached at the telephone number listed below. If I cannot be reached, I hereby authorize his/her adult chaperone or group leader to make emergency medical decisions for my child. If there are any activities I do not want my child to be involved in, I have listed them below. I understand that students will be transported in school/church buses.

I UNDERSTAND AND HEREBY AGREE TO ASSUME ALL OF THE RISKS WHICH MAY BE ENCOUNTERED ON SAID ACTIVITY, INCLUDING ACTIVITIES PRELIMINARY AND SUBSEQUENT THERETO. I do hereby agree to hold First Baptist Church of Winter Garden, Inc. and its agents and employees, harmless from any and all liability, actions, causes of actions, claims, expenses and damages on account of injury to my child or property, even injury resulting in death, which I now have or which may arise in the future in connection with the activity or participation in any other associated activities.

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 Florida and that if any portion thereof is held invalid, it is agreed that the balance shall, non-withstanding, continue in full legal force and effect. This release contains the entire agreement between the parties hereto and the terms of this release are contractual and not a mere recital.

I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT. This is a legally binding agreement which I have read and understand.

Parent or Guardian Signature

Date

Medical Conditions to be aware of:

Telephone number(s) where I may be reached in an emergency:

NOTARIZATION

State of _____ County of _____

I, the undersigned, a Notary Public in and for said County, in said State, hereby certify that _____, whose name is signed to the foregoing instrument, and who is known to me, acknowledged before me on this day that, being informed of the contents of this instrument, he or she executed the same voluntarily on the day the same bears date.

Given under my hand this _____ day of _____, 20 _____.

Notary Public _____