

Conduct Covenant Liability and Release Form

First United Methodist Church Youth Ministry

Release of Liability

I/We the undersigned have legal custody of the student named above, a minor, and have given our consent for him/her to attend events being organized by First United Methodist Church (hereinafter the "Church"). I/We understand that there are inherent risks involved in any ministry or athletic event, and I/we hereby release the Church, its pastors, employees, agents, and volunteer workers from any and all liability for any injury, loss, or damage to person or property that may occur during the course of my/our child's involvement. In the event that he/she is injured and requires the attention of a doctor, I/we consent to any reasonable medical treatment as deemed necessary by a licensed physician. In the event treatment is required from a physician and/or hospital personnel designated by the Church, I/we agree to hold such person free and harmless of any claims, demands, or suits for damages arising from the giving of such consent. I/We also acknowledge that we will be ultimately responsible for the cost of any medical care should the cost of that medical care not be reimbursed by the health insurance provider. Further, I/We affirm that the health insurance information provided above is accurate at this date and will, to the best of my/our knowledge, still be in force for the student named above. I/We also agree to bring my/our child home at my/our own expense should they become ill or if deemed necessary by the student ministries staff member. I/We have also have read the rules of conduct, the above evaluation of my child's health, and permission to participate in youth group activities. I agree to abide by the stated personal limitations and code of conduct. Form must be notarized before being returned.

Parent/guardian signature: _____ Date: _____

<p>State of: <u>Florida</u>, County of <u>Broward</u> Before me the undersigned, a Notary Public for the State of Florida, personally appeared _____ and acknowledged the execution of this instrument this _____ day of _____, 20_____</p> <p style="text-align: center;">_____ Signature of Notary Public</p>

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Printed or typed name of Notary Public

My Commission expires: _____