Safety Participation Agreement

I understand that despite the safety precautions taken by First United Methodist Church that sometimes children injure themselves. I fully understand the dangers, hazards, and risks inherent in such a program. I will, or have instructed my child to, obey all rules, regulations and instructions of program personnel in an effort to minimize such risks. My child is in good physical health and fitness such as to allow participation in the program. In the event of possible injury, I give permission for First United Methodist Church to authorize the administration of emergency medical care for my child.

Child(ren)

REQUIRED Signature of Parent or Guardian

Photo/Video Permission

I also give permission for my child to be photographed for future promotional materials including web-site postings. I do so without expectation of compensation and with the understanding that these photos **may be used** exclusively by First United Methodist Church for its publications, web-site, and publicity purposes.

I have read, understand and accept the terms and conditions stated above and acknowledge that this agreement shall be effective and binding upon the parties during the entire period of participation in this program.

Child(ren)

REQUIRED Signature of Parent or Guardian

School Birthday Permission

To help build the relationship between your child and the CM Director, we sometimes like to visit there school to have lunch with them on their birthday. This is a very special day as it's the day God breathed life into them and we want to celebrate it as such. Do you give me permission for the CM Director to attend your child's school and have lunch with them for their birthday?

 Child
 School

 Child
 School