

Parent Permission/Medical Form
1675 84th St. SE, Caledonia, MI 49316
Phone: 616-698-3170



This permission & medical form gives the student named below permission to participate in **Family Ministry Events from August 1, 2018 - August 31, 2019** as well as permission to seek medical treatment in case of an emergency. If you have questions about the risks involved in a specific event, please contact the ministry director.

Participant Information (To be completed by participant or authorized guardian)

Name of participant: _____ Date of Birth: _____

Name of parents/guardians: _____

Address: _____ Phone: _____

Email Address: _____

Name of emergency contact: _____

Telephone (Day): _____ Telephone (Night): _____

List allergies or medical conditions: _____

Name & dosage of any medication that must be taken: _____

Name of Insurance Company: _____

Policy or Group #: _____

In whose name is the insurance: _____

Participation Agreement

I acknowledge that participation in the activities described above involves risk to the Participant (and to Participant's parents or guardians, if Participant is a minor), and may result in various types of injury including, but not limited to, the following: sickness, bodily injury, death, emotional injury, personal injury, property damage and financial damage. In consideration for the opportunity to participate in the activities described above (the "Activities"), the Participant (or parent/guardian if Participant is a minor) acknowledges and accepts the risks of injury associated with participation in and transportation to and from the Activities. The Participant (or parent/guardian) accepts personal financial responsibility for any injury or other loss sustained during the Activities or during transportation to and from the activities, as well as for any medical treatment rendered to the Participant that is authorized by the Sponsor or its agents, employees, volunteers, or any other representatives (collectively referred to hereinafter as the "Activity Sponsor"). Further, the Participant (or parent/guardian) releases and promises to indemnify, defend, and hold harmless the Activity Sponsor for any injury arising directly or indirectly out of the described Activities or transportation to and from the Activities, whether such injury arises out of the negligence of the Activity Sponsor, the participant, or otherwise. If a dispute over this agreement or any claim for damages arises, the Participant (or parent/guardian) agrees to resolve the matter through a mutually acceptable alternative dispute resolution process. If the Participant (or parent/guardian) and the Activity Sponsor cannot agree upon such a process, the dispute will be submitted to a three-member arbitration panel for resolution pursuant to the rules of the American Arbitration Association.

Permission Statement

As parent/guardian of the above named youth, I give my permission for my youth to participate in the above named activities. I also acknowledge that if my youth has to return home early for discipline violations, it will be at my expense.

Photo Release

I hereby grant Cornerstone Church use of my name, likeness, portrait, pictures or images, voice and biographical information in any manner it chooses, without limitation, in connection with any Cornerstone advertising, promotional materials and social media of every kind. I agree that the materials may be reproduced and distributed through any means, either now known or hereafter developed, in perpetuity, and that I shall not receive any compensation for my participation. I agree that Cornerstone Church shall retain all rights, title and interest in the images. I agree that my participation in the promotional materials gives me no rights of use, ownership or copyright. I hereby release Cornerstone Church, its employees, agents and assigns from all liability for any claims by me or any third party in connection with my participation in the photography/videography for advertising/promotional use [signed on behalf of the above-named minor].

Parent/Guardian Signature _____ Date _____

