



NORTHSIDEKIDS

2021-2022 Northside Baptist Church Consent, Authorization and Release

I hereby give my consent for _____,

(Print Child's Full Name)

to participate in Northside Baptist Church (NBC) activities, church sponsored trips, (including, but not limited to, travel to and from said activities) and in other activities that are part of the expanded Northside program. It is my clear understanding that participation in activities creates a risk normally associated with such activities, including the potential for catastrophic injury or even death. I understand the possible risks that may be involved in these activities, and do not hold Northside Baptist Church, it's staff, or volunteer workers liable, and that, by signing this form, I am stating that I will not hold NBC, it's staff, or volunteer workers at fault in case of sickness or the accidental injury (including death) of my child. In the event of sickness or some other medical emergency, I request that my child receive any medical attention or treatment deemed necessary; therefore, I give permission to any hospital, doctor, and/or health care provider to transport, treat and/or admit for care, my child.

I here by give permission to Northside Baptist Church to use my child's image, whether by video, photography or other wise in Church website, publications, or publicity.

Child's Name _____ Date of Birth _____

Address _____

City _____ State _____ Zip _____

Allergies _____

My Child is: Good Swimmer Fair Swimmer Non-Swimmer

School Attending: _____ Grade in 2021-22 _____

Anything else we should know: _____

Parent/Guardian _____ Cell _____ Email _____

Parent/Guardian _____ Cell _____ Email _____

Family Physician _____ Phone _____

Insurance Company _____ Policy Number _____

Emergency Contact if Parents can't be reached (Name) _____ (Cell Phone) _____

By this authorization, I indemnify, release and hold Northside Baptist Church harmless from any and all liability in providing care and treatment to my child, and further, I grant my permission regarding use of the above information.

Signature of Parent/Legal Guardian

Date