



Authorization to Obtain Urgent or Emergency Medical Care

As the parent(s) or guardian(s) of _____ (child's name), I/we give permission for Bethany United Methodist Church, it's staff, and volunteers to obtain urgent or emergency medical care for my/our child. I/We authorize health care providers to render such care as may be necessary. It is understood that reasonable efforts will be made to contact me/us prior to obtaining such care, but I/we authorize such care whether I/we are contacted or not. I/We also agree to be financially responsible for such care.

Medical Insurance Provider: _____

Policy/Group Number: _____

Participant I.D. Number: _____

Medical Provider's Phone Number: _____

Permission to Participate; Release, Waiver of Liability, and Indemnity Agreement

I/We give permission for _____ (child's name) to participate in the activities of Bethany United Methodist Church, both on the church premises and elsewhere, from **January 1, 2015 – December 31, 2015**. In consideration of the opportunity of my/our child to participate in the activities of Bethany UMC, I/we release Bethany UMC, it's staff, and volunteers from any and all liability of any kind whatsoever for loss or injury to my/our child arising from my/our child's participation in the activities of Bethany UMC. I/We agree to indemnify and hold forever harmless Bethany UMC, it's staff, and volunteers from any and all liability of any kind whatsoever for loss or injury to my/our child arising from activities on or off the premises of Bethany UMC or resulting from traveling to or from the activities of Bethany UMC, including loss or injury resulting from negligence or gross negligence. I/We understand and agree that this permission and agreement shall remain in effect until revoked in writing by me/us. I/We understand and agree that it is my/our responsibility to update my/our child's medical and insurance information as changes occur. I/We understand and agree that I/we are responsible in informing Bethany UMC of any custody changes, i.e.: spending the night at friend or relatives', custody change of parent.

Parent(s)/Guardian(s) signature: _____ **Date:** _____

Permission to Travel with One Adult Present

I/We give permission for my/our child to travel in a vehicle operated and occupied by only one adult. However more than one youth shall be present.

Parent(s)/Guardian(s) signature: _____ **Date:** _____

Photo Permission

I/We understand that my/our child may be photographed during activities with Bethany UMC. I/We **(do)** or **(do not)** give permission for a recognizable image of my/our child to be posted on the internet or public bulletin boards. I understand that a non-recognizable image, such as group photos, maybe posted.

Parent(s)/Guardian(s) signature: _____ **Date:** _____