

Extreme Air 9/16

Parent/guardian signature required. One form per student, please. See reverse side.

Student name: _____ Male or Female

Student phone/email: _____

Age: _____ Date of birth: _____ Last grade completed: _____

Name of parent/guardian(s): _____

Street address: _____

City: _____ State: _____ Zip: _____

Home telephone: _____

Parent/guardian cell phone: _____

Parent e-mail address: _____

Allergies or other medical conditions: _____

In case of emergency, contact: _____

(if parent/guardian can't be reached)

Phone: _____ Relationship to child: _____

Permission Form (must be signed)

I, the undersigned, being the parent or legal guardian of the above minor child, so hereby give permission for him/her to participate in these events sponsored by Covenant Presbyterian Church. Transportation will be provided by parents.

I certify that I am cognizant of the inherent dangers associated with participating in the above activity; that certain aspects of the activity do indeed entail the element of risk, including both bodily injury, dismemberment, or death; and that participating in the activity will take place outside of and off church premises.

I understand and agree that neither Covenant Presbyterian nor its Trustees, representatives, instructors, or agents may be held liable in any way for any occurrence in connection with my child participating in the activity, which may result in injury, harm or other damages to me or my family.

As part of the consideration for being allowed to enroll and participate in the activity, I hereby personally assume all risks in connection with my child's participation in the activity. I further release Covenant, their Trustees, instructors, agents, and representatives from any injury or damage which may befall my child while my child is enrolled in or participating in the activity. I further agree to save and hold harmless Covenant Presbyterian Church, their Trustees, instructors, agents, and representatives from any claim by me or my family, estate, heirs or assigns arising out of my child's enrollment and participation in the activity.

I also authorize the team leaders of Covenant Presbyterian Church to obtain such emergency medical care or treatment as may be necessary should any injury, harm or accident occur to my child while participating in the activity.

In addition, I permit photos/videos to be used for projects and social media for the 2018-2019 school year.

I further state that I am of lawful age and legally competent to sign this affirmation and release, that I understand the terms herein are contractual and are not mere recital, and that I have signed this document of my own free act and volition. I further state and acknowledge that I have fully informed myself of the contents of this affirmation and release by reading before I have signed it.

Signature of Parent or Legal Guardian: _____

Date: _____