

**HIGHLAND OAKS Church of Christ
Parental Consent Form**

Name _____ age(if minor) _____ birth date _____

Address _____ City _____ State _____

Zip _____ Phone _____

Insurance Co. _____ Policy # _____ Group # _____

Emergency Phone #s _____

(Please list medical problems, allergies and other pertinent information on the back of this form)

To whom it may concern:

The undersigned does hereby give permission for the above named minor to attend and participate in activities sponsored by the Highland Oaks Church of Christ. I understand that in the event medical treatment is required for the above named minor, every effort will be made to contact me. However, if I cannot be reached, I authorize an adult in whose care the minor has been entrusted to consent to any x-ray, examination, anesthetic, medical, surgical, or dental diagnosis or treatment, and hospital care to be rendered to the minor under the general supervision and on the advice of any physician or dentist licensed under the provisions of the Medical Practice Act or the medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital. The undersigned shall be liable and agrees to pay all costs and expenses incurred in connection with such medical and dental services rendered to the aforementioned minor pursuant to this authorization. Should it be necessary for my minor to return home due to medical reasons or otherwise, the undersigned shall assume all transportation costs. The undersigned does also hereby give permission for my minor to ride in any vehicle designated by the adult in whose care the minor has been entrusted while attending and participating in activities sponsored by the Highland Oaks Church of Christ.

REQUIRED Parent/Guardian Signature X _____ Date _____

REQUIRED Parent/Guardian Name Printed _____

RELEASE OF CLAIMS

Activity: Highland Oaks Church of Christ Sponsored activities ("activity")

Date: Various 2016 - 2017

I certify that I am cognizant of the inherent dangers associated with participation in the activity and with the fact that participating in the activity may take place outside of, or off of church premises.

I understand and agree that neither Highland Oaks Church of Christ, nor its trustees, representatives, instructors or agents may be held liable in any way for any occurrence in connection with my minor participating in the activity which may result in injury, harm or other damages to me or my family.

As a part of the consideration for being allowed to enroll and participate in the activity, I hereby personally assume all risks in connection with my minor's participation in the activity. I further release Highland Oaks Church of Christ, its elders, ministers, teachers and representatives for any injury or damage which may befall my minor, while my minor is enrolled in or participating in the activity. I further agree to same and hold harmless Highland Oaks church of Christ, its elders, ministers, teachers and representatives from any claim by me or my family, estate, heirs or assigns arising out of my minor's enrollment and participation in the activity. I also authorize Highland Oaks Church of Christ to render or obtain such emergency medical care or treatment as may be necessary should any injury, harm or accident occur to my minor while participating in the activity.

I further state that I am of lawful age and legally competent to sign this affirmation and release; that I understand the terms herein re contractual and not a mere recital; and that I 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 it before I have signed it. I also understand that in the event my minor becomes a discipline problem, he/she will be sent home at my expense and will forfeit all moneys paid.

REQUIRED Parent/Guardian Signature X _____ Date _____

REQUIRED Parent/Guardian Name Printed _____

PHOTOGRAPHY RELEASE

I grant permission to Highland Oaks Church of Christ, its trustees, representatives, instructors, or agents the right to use my child's name, image, likeness, voice, appearance or performance on photographs, film, videotape, slides, audio tapes or other media. AN image of my child may be used without compensation as Highland Oaks deems appropriate including but not limited to use on slides, printed materials, videos or web pages for commercial or non-commercial purposes.

Parent/Guardian Signature X _____ Date _____

Parent/Guardian Name Printed _____