

I, \_\_\_\_\_ (printed name of parent/guardian), am the parent or legal guardian of \_\_\_\_\_ (printed name of minor), hereinafter, "my child", who was born on \_\_\_\_\_ (birthday). My child is attending and participating in activities sponsored by Summit Church Assembly of God (hereinafter, "camp," "church," "school," etc.), located in Anthem, Arizona, beginning on the day of \_\_\_\_\_ (date), year 2020.

**Liability Release**

I understand that all reasonable safety precautions will be taken by the leaders of activities, and that the possibility of an unforeseen hazard does exist. In consideration of the benefits to be derived and after carefully considering the risk involved and in view of the fact that Summit Church is a non-profit organization in Arizona, I or anyone acting on my behalf now have, or hereafter at any time may have, further release and agree to hold harmless from all liability Summit Church. This includes Summit Church's leadership/officers, employees, volunteer staff, and successors for any damages, losses, diseases, or injuries incurred by the minor listed on this form.

Additionally, I understand that if my minor engages in any known or unknown illegal activities at any time while participating in an activity, Summit Church, its leadership/officers, employees, volunteer staff will not be liable for any damages or problems your minor may cause, and will not be liable to perform any legal defense on their behalf.

**Permission to Travel in Vehicle**

If it is necessary, I give permission for my child/youth to travel in a vehicle operated by the staff or volunteers of Summit Church.

**Permission to Treat/Obtain Medical Care**

I understand that I will be notified in the case of an emergency. However, in the case that I cannot be reached, I authorize the calling of a doctor and ambulance and the providing of necessary medical services in the event my minor is injured or becomes ill. I understand that Summit Church will not be responsible for all medical expenses incurred and that such expenses will be my responsibility as parent/guardian.

I have carefully read this agreement and fully understand its contents. I am aware that this is a release of liability and indemnity, and that it is a legally binding agreement between Summit Church and me, and that I sign it of my own free will.

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(Signature of parent or guardian)

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(Date)

**Parent/Guardian Contact Info**

Parent/Custodial Adult: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Work phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City State Zip: \_\_\_\_\_

Alternate emergency contact:

Name: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

**Medical Insurance**

Company: \_\_\_\_\_

Policy/Group Number: \_\_\_\_\_

**Special Health Concerns / Allergies (including medications child/youth can NOT take)**\_\_\_\_\_  
\_\_\_\_\_**Photo Permission**

I understand that my child may be photographed while participating in the activities of Summit Church. I **do give permission** for a recognizable image of my child to be posted on the Summit website, publications, and/or other Summit media (facebook, etc).

(Please initial one)

Yes

No