

**FARMINGTON FIRST UNITED METHODIST CHURCH
PARENT/GUARDIAN RELEASE STATEMENT and REGISTRATION
LOGOS 2017-2018**

Name of Student: _____ Birth date: _____

School Student Attends: _____ Grade: _____ Age: _____

Gender: _____ Email Address of Parent(s): _____

Parent(s): _____ Phone: _____

Home Address: _____

Allergies to Food, Medications, etc.: _____

Anything the Logos staff should know about the student? _____

Emergency Contact: _____ Phone: _____

As parent/Legal guardian of the above student, I have reviewed the information about the Logos Youth ministry. I give my permission for the student to be involved in the overall activities of Logos, in the annual Picnic at Shiawassee Park, the Camp-in, the Trunk or Treat Event and other specific activities that I have initialed on the back of this form.

The student will abide by all rules set by the Church or its leaders for these activities. If the student is returned home early for discipline violations, it will be at my expense.

I agree that any video images, photographs, audio recordings, or any other visual or audio reproduction that may be taken of the student during the activities may be used, distributed, or shown as the Church sees fit.

I believe reasonable safety precautions will be taken by the Church and its agents during the events and activities. However, I understand the possibility of injuries, unforeseen hazards, and the inherent risks. I agree not to hold the Church, its employees, members and volunteers liable for and I release them from any damages, losses, diseases, or injuries incurred by the student. The designated Church leader for each activity is authorized to obtain any necessary emergency medical care for the student, at my expense.

Cost- \$75 per child

Parent/Guardian Signature: _____ Date: _____

Parent Volunteer Job(s): _____

Health Insurance carrier and policy number: _____

Amount Paid: _____ Date: _____ Notes: _____