

**Pilgrim Congregational Church  
Merrimac, Massachusetts**

**Permission Slip and Release Form**

**Event:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Instructions: PLEASE WRITE YOUR CHILD'S COMPLETE MEDICAL INSURANCE INFORMATION AND AN EMERGENCY CONTACT NUMBER ON THE BACK OF THIS FORM.** If you have any questions please contact Marie Roy at 978/346-9900.

\_\_\_\_\_ has my permission as her/his parent or legal guardian to participate in the \_\_\_\_\_, sponsored by Pilgrim Congregational Church on \_\_\_\_\_, 2008.

I acknowledge that by participating in church-sponsored events, my child will be involved in activities off church property, taking place during both day and evening hours, requiring transportation by motorized vehicle, and involving the consumption of food. I further acknowledge that by participating in this church-sponsored event, my child may become involved in indoor and outdoor recreational and sporting events including, but not limited to, tubing and/or snowmobiling. Accordingly, I acknowledge that participation in church-sponsored events involves certain dangers and risks, may expose my child to hazards of bodily injury, or property damage, and may result in my child being unable to contact me or unable to receive immediate medical care and assistance if injury occurs. Therefore, in the event of an emergency, I grant the Pilgrim Congregational Church youth leadership staff temporary guardianship of my child should my child require immediate medical attention.

*In recognition of these risks and realities, and in consideration of my child being offered the opportunity to participate and benefit from this church-sponsored event, I agree to permit my child to participate in and benefit from this church-sponsored event, I agree on behalf of myself and my child to release, waive and disclaim any and all liabilities of, or claims against, Pilgrim Congregational Church, its officers, board/committee members, supervisors, agents, servants, employees, and all private persons or organizations volunteering services without charge to transport, supervise, or chaperone my child while participating in church-sponsored activities including, but not limited to, any or all liabilities or claims for personal injury, property damage, court costs, attorneys' fees and interests, however caused or accrued as a result of my child participating in the church-sponsored events.*

I agree that Pilgrim Congregational Church, its officers, board and committee members, supervisors, agents, servants and/or employees have the right to terminate the participation of my child in any or all church-sponsored activities for failure to behave and act in accordance with the church's regulations on conduct, for failure to follow the instructions and directions of the activity supervisor(s) and/or chaperone(s), or for any conduct of my child deemed by the church, its officers, board/committee members, supervisors, agents, servants and/or employees, in their sole discretion, to be detrimental to or incompatible with the interest, harmony comfort or welfare of others or the activity as a whole. I further agree to indemnify Pilgrim Congregational Church, its officers, board/committee members, supervisors, agents,

events and/or employees for any and all damage or injury my child may cause to others as a result of his/her participation in this church-sponsored event.

**Special needs or concerns:** \_\_\_\_\_

**Allergies:** \_\_\_\_\_

**Medical Conditions:** \_\_\_\_\_

**Medical Insurance Co.** \_\_\_\_\_

**Medical Insurance #:** \_\_\_\_\_

**Primary Insurance Carrier:** \_\_\_\_\_

**Place of Employment and Phone #:** \_\_\_\_\_

\_\_\_\_\_  
**Name and Phone # for emergency contact if parents can't be reached:**

**Please list any medication your child is currently taking (prescription or over-the-counter):**

\_\_\_\_\_  
**Signature of Parent/Legal Guardian** **Date**

\_\_\_\_\_  
**Print Name of Parent/Legal Guardian**