

2023-2024 PARENT/GUARDIAN CONSENT, ACKNOWLEDGEMENT OF RISK, WAIVER, RELEASE & INDEMNITY

PARENT/GUARDIAN INFORMATION

PARENT/GUARDIAN #1		
☐ Parent or ☐ Guardian name: (Please check one)		
Email address:*		
Home phone number:		
Cell phone number:		
Address:	City:	Postal code:
Please note that the "PARENT/ GUARDIAN	•	
parents are separated/divorced and perm different parent/guardian picking up and PARENT/GUARDIAN #2	ission of the other parent dropping off the child fron	is required, <u>OR</u> if there will be a n week to week.
parents are separated/divorced and perm different parent/guardian picking up and PARENT/GUARDIAN #2 □ Parent or □ Guardian name:	ission of the other parent dropping off the child fron	is required, <u>OR</u> if there will be a n week to week.
parents are separated/divorced and perm different parent/guardian picking up and PARENT/GUARDIAN #2 Parent or Guardian name: (Please check one)	ission of the other parent dropping off the child fron	is required, <u>OR</u> if there will be a n week to week.
parents are separated/divorced and perm different parent/guardian picking up and PARENT/GUARDIAN #2 Parent or Guardian name: (Please check one) Email address:*	ission of the other parent dropping off the child fron	is required, <u>OR</u> if there will be a n week to week.
parents are separated/divorced and perm different parent/guardian picking up and PARENT/GUARDIAN #2 Parent or Guardian name:	ission of the other parent dropping off the child fron	is required, <u>OR</u> if there will be a n week to week.
parents are separated/divorced and perm different parent/guardian picking up and PARENT/GUARDIAN #2 Parent or Guardian name:	ission of the other parent dropping off the child fron	is required, <u>OR</u> if there will be a n week to week.

*Email Addresses: please note that by providing your email address, you will be signed up to receive monthly parent emails with very important information about news, deadlines, event details, etc. It is **STRONGLY** encouraged that at least 1 parent get these emails in order to stay up-to-date on what is going on in our ministry

CHILD'S INFORMATION

Name of child:	
Date of birth:	
Child's cell phone number:	
School:	Grade (As of September 2023):
Regular form of transportation:	
Who is allowed to pick-up the Child?:	
Does the Child have any allergies (dietary, medical that the Lethbridge First Baptist Church should be	I, etc), or any other medical concerns or conditions aware of (Please list all):
EMERGENCY CONTACT	
Name of emergency contact:	
Primary phone number:	
Alternate phone number:	(if available)
First Baptist Church (which includes its employees	ardian of the Child, hereby authorize the Lethbridge, youth leaders, volunteers, and agents), in the event aid to the Child and transport or arrange emergency r medical treatment if required.
Alberta Health Care number:	

NOTICE TO PARENT/GUARDIAN

It is a condition to the Child's participation in regular weekly youth activities (the "Activities") held by the Lethbridge First Baptist Church, located at 1614 5 Ave S, Lethbridge, Alberta, that you, the undersigned Parent/Guardian of the Child, must carefully read and understand this document and sign it to acknowledge that you have read and understand it and that you understand that the Child's participation in the Activities will expose the Child to risks of harm, and that you accept full responsibility for exposing the Child to such risks.

"Activities" include, but are not limited to: weekly youth events, Sunday morning classes, games at the church, movie nights, various youth gatherings, scavenger hunts, bowling, mini golf, floor hockey, basketball, and other physical activities. The Activities may occur online through platforms such as (but not limited to) Zoom, at the physical church building, and in various locations within the City of Lethbridge and surrounding areas. The Activities from time to time will require the Child to travel to various locations, which the Child, along with other participating youth, may be transported in the vehicles of the employees, youth leaders, volunteers, or agents of the Lethbridge First Baptist Church.

Activities may also include Special Events/Activities, which the Lethbridge First Baptist Church will require additional waivers in conjunction with this form for each occasion.

PARENT/GUARDIAN RESPONSIBILITY FOR CHILD: I, the undersigned Parent/Guardian of the Child, understand and accept that, in respect of the Child's participation in the Activities, it is my responsibility to:

- (1) ensure that I consider and understand the risks, dangers, hazards and consequences of injury inherent in the Activities;
- (2) determine, taking into consideration those risks and the Child's behavioral characteristics, physical health and abilities, whether the Child should be allowed to participate in the Activities;
- (3) ensure that the Child is appropriately covered by medical insurance for any harm occurring in the Activities; and
- (4) provide any emergency medical information regarding the Child as required in this document.

AWARE OF RISKS: I, the undersigned Parent/Guardian of the Child, am fully aware of and now freely accept and assume for me and the Child responsibility for all risks to the Child in connection with his or her participation in the Activities, including, but not limit to, the following:

- (1) the Child's participation in the Activities, even if the Child possesses behavioral characteristics, physical health and abilities appropriate for the Activities, that poses risk of harm to the Child; and
- (2) the nature of the Activities are such that the Lethbridge First Baptist Church cannot identify all risks associated with the Activities and cannot guarantee that Lethbridge First Baptist Church staff participating in or supervising the Activities will not make errors therein or that other children participating in the Activities will not cause injuries therein, that staff can or might be able to prevent.

I, THE UNDERSIGNED PARENT/GUARDIAN, AM THE PARENT AND/OR LEGAL GUARDIAN OF THE CHILD AND FOR THE CHILD I HEREBY CONSENT TO HIM OR HER PARTICIPATING IN THE ACTIVITIES, AND, FOR MYSELF AND THE CHILD, IN RETURN FOR THE LETHBRIDGE FIRST BAPTIST CHURCH ALLOWING THE CHILD TO PARTICIPATE IN THE ACTIVITIES:

a) I NOW WAIVE ALL LEGAL RIGHTS TO SUE AND ANY AND ALL CLAIMS which I or the Child or our respective successors and assigns may have against the Lethbridge First Baptist Church, including all employees, youth leaders, volunteers, and agents of the Lethbridge First Baptist Church, in connection with any loss, injury, damage or expense that I or the Child may suffer, incur or may suffer, incur or experience in connection with the Child's participation in the Activities;

- **b) I HEREBY RELEASE** the Lethbridge First Baptist Church, including all employees, youth leaders, volunteers, and agents of the Lethbridge First Baptist Church, from any and all liability for any complaints, demands, claims, actions, suits, judgments and Orders for any and all losses, injuries, damage or expenses I or the Child may suffer, incur or experience in connection with the Child's participation in the Activities; and
- c) FOR MYSELF, I AGREE TO INDEMNIFY the Lethbridge First Baptist Church for and hold it harmless from any and all losses, injuries, damages and expenses of any kind that the Lethbridge First Baptist Church may suffer, incur or experience and for any and all complaints, demands, claims, actions, suits, judgments and Orders for any and all losses, injuries, damages or expenses of any kind anyone else may suffer, incur or experience in connection with the Child's participation in the Activities.

In signing this document and permitting the Child to participate in the Activities, I do not rely on any oral or written statements, promises or other communications made by the Lethbridge First Baptist Church other than those set out in this document. I hereby acknowledge and confirm that I have had the opportunity to review this document in its entirety, with the further opportunity to obtain legal advice, and completely understand and agree to the terms set out herein.

Signature of Parent/Guardian	Witness (Name):	
Date	Witness (Signature):	
*Signature of Other Parent/Guardian if necessary:		
Signature of Parent/Guardian	Witness (Name):	
Date	Witness (Signature):	

MEDIA CONSENT FORM – CHILD YOUTH

Re:	(the "Child")	
(Nam	e of child)	
PLEASE CH	ECK ONE OF THE FOLLOWING	
□ YES	I,	
	identification of the Child will not be released unless additional Consent by the Parent/Guardian has been provided.	
□ NO	I do not provide authorization for the Lethbridge First Baptist Church to photograph of video and/or otherwise record images, videos, and sounds of or including the Chil while he or she participates in activities held by the LFBC	
I have care	fully read and understand the above.	
Signature o	of parent/guardian	
Date		