

CONSENT AND RELEASE FORM

I/We as parents/guardians of _____ with the _____ (group/activity) do hereby give our approval to my/our child's participation in the various athletic and other activities of Mt. Auburn United Methodist Church, Mt. Auburn Courts, Mt. Auburn Youth groups and classes.

I/We are aware of the nature and extent of the activities that may take place and travel involved and represent to you that the participant is physically and mentally able to participate in those activities.

I/We understand that the activity(s) may present a risk of serious injury. I/We and the participant assume all risk of any such injury and agree to indemnify and hold Mt. Auburn United Methodist Church, Mt. Auburn Courts, Mt. Auburn Youth groups and classes, its agents, employees, Pastors, staff, officers, Trustees, members and representatives harmless from any and all liability from injury or death to the participant while engaged in this activity, which are caused or contributed to by the participation or conduct of the participant.

I/We further agree that no action will be brought by us, on behalf, or on the behalf of my/our child for any loss or damage sustained by us or by my/our child by reason of participation in any activity sponsored by Mt. Auburn United Methodist Church, Mt. Auburn Courts, Mt. Auburn Youth groups and classes.

Any equipment that is furnished to or used by the participant is made available merely for our benefit and the benefit of the participant. I/We understand that Mt. Auburn United Methodist Church, Mt. Auburn Courts, Mt. Auburn Youth groups and classes makes no representation as to such equipment's quality or fitness for use or as to the selection of such equipment.

Participant assumes all risk of injury to person or property arising out of the use of such equipment supplied by Mt. Auburn United Methodist Church, Mt. Auburn Courts, Mt. Auburn Youth groups and classes whether the equipment be rented, owned, or otherwise, for the use of the participant named above, including any claim or causes of action for an alleged defect in any and all equipment supplied by Mt. Auburn United Methodist Church, Mt. Auburn Courts, Mt. Auburn Youth groups and classes.

If I/we are not personally present at the activities in which the participant is to participate so as to be consulted in the event of necessity or emergency, you are hereby authorized on my/our behalf to arrange for such medical, dental, hospital, or health care treatment as you may deem advisable for the health and wellbeing of the participant. I/We assume all financial obligation for all medical, dental, hospital, or health care services given to my/our child/ward.

This release remains in effect until written notice revoking this release is received.

**MT. AUBURN UNITED METHODIST CHURCH
CONSENT AND RELEASE FORM
Page 2**

I/We, the undersigned have read this Consent and Release and understand all of its provisions. I/We execute it voluntarily and with full knowledge of its significance. I/We also acknowledge and so state that I/We are legally entrusted parent(s)/guardian(s) for the above named child, children, or ward(s).

IN WITNESS WHEREOF, I/WE HAVE EXECUTED THIS ON THE _____ day of _____, _____.

Parent/Guardian _____

Mailing address _____

Phone number _____ Email Address _____

Parent/Guardian _____

Mailing address _____

Phone number _____ Email Address _____

Received by Mt. Auburn _____

EMERGENCY CONTACT INFORMATION:

Names: 1st _____

2nd _____

Phone Numbers: 1st _____ 2nd _____

Hospital Insurance: ___ Yes ___ No Participant _____

Insurance Company: _____

Policy Number: _____

Special Medical Needs, Allergies, Notes:

