

## Activity Consent and Liability Release Freshwater Community Church

Student \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_

Parent(s) names \_\_\_\_\_

My child has permission to participate in the **5th/6th Grade Fast Food Frenzy Event, May 19, 2026 in Wadsworth**. I authorize Freshwater Community Church to transport my child in a private vehicle driven by a staff member or volunteer. I understand that my child will be participating in several activities, including but not limited to physical activities such as running, eating, and riding in a vehicle driven by an adult staff member or volunteer.

Activities I do not want my child to be involved in are listed below. I also reserve the right to withhold permission for any specific events at my discretion.

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I give permission to have my child treated in case of medical emergency. In the event of a medical emergency and I cannot be reached, I hereby authorize the Ministry's staff or volunteers, and/or emergency and medical personnel to make emergency medical decisions for my child. I acknowledge that the Ministry does not provide any health insurance covering my child the activities referred to herein, and I further acknowledge that it is my responsibility to obtain health insurance covering said child. I agree to accept the sole responsibility for the cost of medical care.

I also grant permission to the Ministry, and its representatives, contractors, employees and volunteers acting on behalf of the Ministry, to take and/or use, copyright, publish, edit, crop or treat images or likenesses of me or my child(ren), including photographs, videos or otherwise, for any lawful use on the Ministry's website, social media pages, blogs, or in other official Ministry printed or electronic publications without further consideration. I understand that this consent and release will operate in full force and effect until such time as I withdraw my consent in writing. I understand that should photographs or videos of me or my child(ren) be used on Ministry-owned or operated websites or webpages, they may be available for download.

**I UNDERSTAND AND HEREBY AGREE TO ASSUME ALL THE RISKS WHICH MAY BE ENCOUNTERED AT THE ACTIVITIES SPONSORED BY THE MINISTRY THAT MY CHILD WILL BE ATTENDING PURSUANT TO THIS CONSENT AND RELEASE FORM, INCLUDING TRANSPORTATION TO AND FROM SAID EVENTS.** In consideration of my child being permitted to participate in the event(s) described above and other valuable considerations the receipt of which is acknowledged, I hereby **AGREE TO RELEASE, DEFEND, INDEMNIFY,**

**AND HOLD HARMLESS** the Ministry and its agents and employees from any and all past, present, and future, known and unknown liabilities, actions, causes of action, claims, expenses, personal injuries, and damages, **INCLUDING THOSE CAUSED BY THE NEGLIGENCE OR FAULT OF THE MINISTRY, ITS LEADERS, EMPLOYEES, OR VOLUNTEERS**, and including without limitation, interest, penalties, court costs, attorney's fees and expenses resulting from or on account of injury to my child, myself, or my property in connection with any event anticipated by this form. **I FURTHER RELEASE** any and all claims brought by or through me, including claims for loss of consortium and all similar claims based on relationships with other people. **I EXPRESSLY AGREE** that this release, waiver, and indemnity agreement is intended to be as broad and inclusive as permitted in the State of Ohio and that if any portion hereof is held invalid, it is agreed that the remainder shall, notwithstanding, continue in full legal force and effect. **I ALSO AGREE** that any controversy or claim, by or through the party signing this release, arising out of or relating to the activities anticipated by this form shall be settled by binding Christian arbitration conducted by the National Center for Life and Liberty or another Christian arbitrator, and judgment on the award may be entered in any court having jurisdiction thereof. This release contains the entire agreement between the parties hereto and the terms of this release are contractual and not mere recitals.

**I FURTHER STATE** that I have carefully read the foregoing consent and liability release and know the contents thereof and I sign this document as my own free act. This is a legally binding agreement which I have read and understand.

MEDICAL/INSURANCE INFORMATION

Primary emergency contact person & phone \_\_\_\_\_

Alternative emergency contact person & phone \_\_\_\_\_

Physician's name \_\_\_\_\_ Phone \_\_\_\_\_

Known allergies & type of reaction \_\_\_\_\_

Chronic illnesses \_\_\_\_\_

Any current medications with dose amount \_\_\_\_\_

\_\_\_\_\_

Parent signature \_\_\_\_\_

Date \_\_\_\_\_ Relationship to child \_\_\_\_\_