

**First United Methodist Church
Youth/Kids 2024-2025 Release and Consent Form**

I, the undersigned, am the parent having legal custody or the legal guardian of

_____,
a minor, and have given my consent for him/her to go with First United Methodist Church of Marianna, Florida (“FUMC”) on one or more activities. In the event that he/she is injured while participating in the FUMC-sponsored activity and requires the attention of a doctor, I consent to any medical treatment deemed necessary by a licensed physician. In the event treatment is called for which a physician and/or hospital personnel refuse to administer without my consent, and if I cannot be reached by telephone at one of the numbers listed on this form, or if, because of an emergency, there is not time or opportunity to make a telephone call, then one of the chaperones is hereby granted permission to give consent for me, and I agree to hold him/her and FUMC free and harmless of any claims, demands, or suits for damages arising from the giving of such consent, as long as the treatment is administered by or under the supervision of a licensed physician. I understand and agree that any expenses incurred in providing medical treatment for my child will be my responsibility and not the responsibility of FUMC or any other party. I recognize there are risks, including those of injury and death, in all activities. I freely assume those risks on my own and my child’s behalf. I (we) agree to release and hold harmless from liability FUMC, its staff members, volunteer workers, and other employees and agents in the event of injury or death of my son/daughter, resulting from negligence or any other theory of liability while engaging in any FUMC-sponsored activity. I agree to not make any claim or file any lawsuit against FUMC, its staff members, volunteer workers, and other employees and agents, for injuries or damages related to my child’s participation in FUMC activities.

Photo permission: I [circle one] **do** / **do not** give permission for my child to be photographed and/or videotaped during activities, and for those images to be used by FUMC in church bulletins, web pages, social media pages, and other print or online publications. I understand that no royalty, fee, or other compensation shall become payable to me by reason of such use. Initials: _____

I, the undersigned, have read this Release and Consent Form and understand all its terms. I execute it voluntarily and with full knowledge of its significance.

Printed name _____

Signature _____

NOTARY USE ONLY

Notary seal:

Date: _____

Notary Signature: _____