



Immanuel Lutheran Church

Youth Permission Slip/Liability Release

As the parent/legal guardian of \_\_\_\_\_, I completely understand my son/daughter is participating in activities sponsored by Immanuel Lutheran Church. I am allowing him/her to participate and will not hold Immanuel Lutheran Church, any of its agents, assigns, employees, or volunteer sponsors (hereafter all referred to as sponsors) liable for any accidents, injuries, or any other unforeseen harms incurred at any time while participating in these activities, except in the case of gross negligence.

I authorize Immanuel Lutheran Church and its sponsors to find adequate and reasonable medical treatment at my expense, if the need arises. This waiver will serve as a medical release form, thus authorizing the sponsor permission to act on my behalf until such a time in which I can be contacted.

Additionally, I understand if my son/daughter engages in any known or unknown illegal activities at any time while participating in this youth event, Immanuel Lutheran Church and its sponsors will not be liable for any damages or problems he/she may cause, and will not be liable to perform any legal defense on my child’s behalf. I also understand if any problems do arise, my son/daughter will be sent home, at my expense, on the first available means of transportation, at the sponsor’s discretion. The parent/guardian will be contacted in the event this action is necessary.

I understand by signing below, as the parent/legal guardian, I agree to and will adhere to the preceding statements and grant permission for my child to participate in Immanuel Youth activities (Signing below does not nullify your rights granted to you by local, state, and federal laws). Also, I understand my child will not be allowed to participate if they are not accompanied by this completed form before the activity begins.

\_\_\_\_\_ PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ PHONE #

As a youth participant, I agree to abide by the guidelines and instructions of the leadership of Immanuel Lutheran Church. I understand if I disobey guidelines, instructions and expectations of the leadership, I will be sent home at my parent’s/guardian’s expense.

\_\_\_\_\_ YOUTH SIGNATURE \_\_\_\_\_ DATE

PARENTS: Please add any information about your youth, which will be helpful for the leadership on these trips, to the reverse side of this form.

\*This form will be in effect for 13 months from date signed.