



**Parent Information and Permission Release Form
Cornerstone Church**

The following is a permission release form that will give approval from the below signed guardian, to Cornerstone Student Ministries for all activities that would provide travel to and from youth events leaving from the church premises.

I hereby give permission for my son/daughter to participate in all activities from June 1, 2013 until May 31, 2014. This will cover all events on one permission form during this time, instead of having multiple forms to sign for each activity. Unless previously arranged by me, I understand that he/she will be driven by a responsible adult. This document gives permission for my child to leave the church premises to participate in activities planned through Cornerstone Student Ministries.

Name of Student _____
Date of Birth _____ Age _____ Grade _____
Home Address _____
Town _____ State _____ Zip _____
Home Phone # (____) _____ Cell Phone # (____) _____
Parent e-mail Contact _____
Gender of Child _____

____ Check here to acknowledge that you are giving permission for this permission slip/release form to be kept on file and used for all Cornerstone Student Ministry events your son/daughter attends during the 2013-2014 year.

Parent/Guardian Signature _____
Date _____

Photo/Video release: *Photographs /videos taken during Student Ministry activities may be used in media such as: e-newsletters, Cornerstone's website, bulletin, facebook, etc.*

Names are not included with pictures. (Except on Facebook if they are tagged by someone else)

As parent or legal guardian, I hereby give permission for the pictures of the students listed above to be published. (valid for 1 year)

Parent/Guardian signature _____ Date _____

CORNERSTONE CHURCH

PARENTAL PERMISSION AND AUTHORIZATION FOR MEDICAL TREATMENT

I, the undersigned parent or legal guardian of the listed minor child or children, hereby authorize my child or children to attend all Cornerstone Student Ministry events. It is understood that I assume all risk of loss or injury on behalf of my attending children. Further, in the event of any accident or illness involving my child I hereby authorize any representative of Cornerstone Church; its agents, employees or designees to arrange for and authorize any necessary medical, surgical and/or dental care. Any qualified physician, nurse, hospital and/or emergency medical facility personnel may perform such treatment which in their professional opinion is required to safeguard the well-being of my child. I also agree to accept full responsibility for all cost of such medical or related service.

RELEASE AND WAIVER OF CLAIMS AGAINST CORNERSTONE CHURCH

I, the undersigned parent or guardian of such minor children as listed below, and on their behalf, do hereby release, acquit and forever discharge and agree to hold harmless Cornerstone Church, its Directors, employees, volunteers, members and administrators from any and all actions, causes of action, claims, demands, costs, expenses and compensation in any way arising out of my child's participation in activities sponsored by Cornerstone Church.

It is understood and agreed that this is a full and complete release and waiver of all claims and damages which the undersigned may claim as a result of participation in said activities by reason of injury, negligence, or other cause, and all losses as a result thereof. It is further understood and agreed that in the event that any claim is asserted against Releasee, I will hold Releasee harmless from such claim.

My child's allergies, physical or medical problems and current medication(s) are as follows:

Our family physician is _____ phone _____

Emergency Contact name and # is _____

I have carefully read this release and authorization and understand it; I have signed as my own free act and deed.
(Please print the following information)

Name of Child or Children: _____ Parent or Guardian: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime phone: _____ Evening phone: _____

Signature of Parent or Guardian: _____

Date: _____