

## Youth Registration & Release Church of the Nativity

Effective for all youth activities on and off Church of the Nativity property from September 1<sup>st</sup>, 2017 to August 31<sup>st</sup>, 2018.

### Youth Registration

Youth Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_

Grade 2017-2018: \_\_\_\_\_ School: \_\_\_\_\_

Adult T-Shirt Size: **S M L XL** Youth DOB: \_\_\_ / \_\_\_ / \_\_\_

Youth Cell: (\_\_\_\_) \_\_\_\_\_

Youth Email: \_\_\_\_\_

Best way to contact youth: **Email Call Text**

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

#### A Few of My Favorite Things: (For youth to fill out about themselves)

Beverage: \_\_\_\_\_

Salty Snack: \_\_\_\_\_

Restaurant: \_\_\_\_\_

Movie: \_\_\_\_\_

Dessert: \_\_\_\_\_

TV Show: \_\_\_\_\_

Candy: \_\_\_\_\_

Artist/Band: \_\_\_\_\_

### Parent Information

Parent 1 Name: \_\_\_\_\_

Parent 1 Cell: (\_\_\_\_) \_\_\_\_\_

Parent 1 Email: \_\_\_\_\_ Parent 1 Work: (\_\_\_\_) \_\_\_\_\_

Parent 2 Name: \_\_\_\_\_

Parent 2 Cell: (\_\_\_\_) \_\_\_\_\_

Parent 2 Email: \_\_\_\_\_ Parent 2 Work: (\_\_\_\_) \_\_\_\_\_

Best way to contact parent: **Email Call Text**

### Media Release

\_\_\_\_\_ I consent to use of all photographs, audio recordings, and/or video recordings taken of me or my minor child by Church of the Nativity, Raleigh. I understand these photographs, audio recordings, and/or video recordings become property of Church of the Nativity for educational, instructional, and promotional purposes in broadcast and media formats including print, social media, presentations, and website use. (Including Emails, newsletters and social media of Nativity)

\_\_\_\_\_ I **DO NOT** give consent to use of any photographs, audio recordings, and/or video recordings taken of me or my minor by Church of the Nativity, Raleigh.

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Medical Release**

Policy Holder Name: \_\_\_\_\_ Policy Holder DOB: \_\_\_\_\_

Medical Insurance Company: \_\_\_\_\_ Policy #: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Chronic Conditions (Allergies, Special Considerations, Medical Concerns, etc.): \_\_\_\_\_

Emergency Contact (other than parent): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Additional Number: \_\_\_\_\_

I hereby give permission for my child, \_\_\_\_\_, to participate in youth activities offered by Church of the Nativity, Raleigh, and in connection therewith do hereby authorize said church to transport my child either in vehicles owned by the church, in private vehicles furnished by authorized adult volunteers or employees of the church, or in public transportation, to various activities throughout the state of North Carolina and contiguous states from September 1<sup>st</sup>, 2017 through August 31<sup>st</sup>, 2018.

As parent (or legal guardian) of the above stated youth, I attest that he or she is in good health and that I know of no physical, mental, or emotional reason that would prohibit my son or daughter from attending youth group activities. I understand that every measure and precaution has been taken to assure the good health and safety of each participant and therefore I waive any liability of Church of the Nativity or staff or volunteers representing it for personal injury or death while attending the group's activities. I give permission for my child to receive approved over the counter medication from adult supervisors unless specified above.

In the event that my child becomes ill or is injured and reasonable attempts to contact me have been unsuccessful, I hereby consent to emergency medical treatment by a physician or medical personnel selected by Church of the Nativity staff or volunteer. I hereby give my consent for (1) the administration of any treatment or medication deemed necessary by the selected medical personnel; and (2) the transfer of the child to any hospital reasonably accessible.

In consideration of my child being allowed to participate in Church of the Nativity youth activities, I hereby assume all risks and release Church of the Nativity, its employees, and volunteers from all liability whatsoever for any injuries or accidents in connection with my child's participation or presence on the premises of the Church, and waive any right I may have to recover medical payments, property damages or bodily injury damages for any liability regardless of cost, due to ordinary negligence causing any injury that my child or I may sustain from any source. I intend this release to be binding not only for myself, but also on my family and all legal successors in interest.

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_