

first baptist atlanta parental release form

2024-2025 school year

Student Information:

Student First Name:	Middle Name:	Last Name:		
School Attending:	Grade:	DOB:	Male/Female:	
Who does student live with:	Home Phone:			
Address:	City, State, Zip:			

Parent/Guardian Information:

Parent/Legal Guardian #1 Name:	Cell Phone:
Parent/Legal Guardian #2 Name:	Cell Phone:
Parent #1 Email:	Parent #2 Email:

Emergency Contact:

Emergency Contact Name:	Relationship to Minor:
Emergency Phone:	

Medical Information:

Known allergies of this minor, including any allergies to medicine:	
Any medical problems which should be noted:	
Primary Care Physician:	Phone:
Medical Insurance:	Phone:
Policy/Group ID#:	Policy Holder's Name:

Parental Consent

I, _____, am the parent or legal guardian of _____ (the "Minor"), who desires to participate in various programs, events and/or activities operated or sponsored by First Baptist Atlanta (the "Church"), both on the FBA property and off the FBA property. In consideration of being permitted to participate in the events and activities and to use the facilities and equipment available at FBA or the event site, I, on behalf of the Minor and my representatives, executors, heirs, spouse, next of kin, administrators, beneficiaries, successors and assigns (collectively, "my Representatives"), hereby agree to be bound by this Release.

Liability Release

I understand that such participation entails certain inherent risks, and I, on behalf of the Minor and my Representatives, voluntarily accept all risk to the Minor's health that may result from such participation. Therefore, I, on behalf of the Minor and my Representatives, hereby agree that FIRST BAPTIST ATLANTA, its related and/or affiliated entities, their respective past, present and future trustees, directors, officers, employees, agents, representatives, attorneys, insurers, volunteers, successors and assigns (hereinafter, "Released Parties") SHALL NOT BE LIABLE FOR ANY DAMAGES arising from (a) the DISCLOSURE OF MEDICAL INFORMATION contained in documents completed for eligibility to participate in events or activities (if believed necessary by the Released Parties), and/or (b) PERSONAL INJURIES (INCLUDING DEATH), DAMAGE TO OR LOSS OF PROPERTY OR OTHER HARM, whether foreseen or unforeseen, present or future, known or unknown, that the Minor may sustain in any way which directly or indirectly results from or arises from the Minor's attendance or participation in the event or activities. Furthermore, I, on behalf of the Minor and my Representatives, COVENANT NOT TO SUE and agree to INDEMNIFY, DEFEND AND HOLD HARMLESS the Released Parties from and against any and all claims, foreseen or unforeseen, present or future, known or unknown, that I or my Representatives may have or assert, even if caused in whole or in part by the NEGLIGENCE, FAULT, BREACH OF CONTRACT, STRICT LIABILITY, OR OTHER ACT, CONDUCT OR STATUS of any of the Released Parties. This indemnification includes all costs of defending such claims, including attorneys' fees, costs and expenses, whether suit is filed or not.

Initial_____

Transportation Release

I acknowledge and agree that I have given my consent for the Minor to remain in the custody of the Church's representatives while participating in the events/activities. I understand and give authorization for the transportation of the Minor if provided by the Church or contracted services to the Event driven by authorized, certified representatives, employees or volunteers and agree to hold harmless of any and all liability, actions, causes of actions, claims, expenses and damages on account of injury to the Minor associated with transportation subject to the terms of this Release.

Initial_____

Early Return Home Policy

Should it be necessary for my child or youth to return home due to medical reasons, disciplinary action or otherwise, the undersigned shall assume all transportation costs and responsibility.

Initial_____

Medical Release

I certify that the Minor is in good health, has no mental or physical conditions that would prevent or restrict his/her participation in the Events/Activities available at the destination in which I choose to allow the Minor to participate, and I further certify that the Minor has no condition that requires the taking of medication on a regular basis, except as fully and expressly indicated in the written medical information form provided with this executed release. I also certify that to the best of my ability, I will keep my child home if exposed to any contagious disease within the past 30 days prior to an Event/Activity.

I understand and agree that the Church may not have medical personnel available at the location of the Event. I understand and agree that the Church is granted permission to authorize emergency medical treatment including transportation for the Minor, if necessary, and that such action by the Church shall be subject to the terms of this Release. I understand and agree that the Church assumes no responsibility for any injury or damage, which might arise out of or in connection with such authorized emergency medical treatment. I further state that the Minor has adequate health insurance necessary to provide for and pay any medical costs that may be attendant as a result of injury to the Minor at this Event and/or participation in Activities.

Initial_____

Photo/Video Release

I understand that as a result of the Minor attending FBA, I will allow photos and videos to be taken which may include the Minor which may be used in Church and Ministry publications and other resources. Regarding photographs of the Minor taken at the Event, I give the Church permission to do the following for non-profit use and without charge: use at the discretion of the Church, display at a service or event or be used in a multimedia presentation, reprint and distribute for any Church non-profit publication with copyright to accompany photo when used (for example, in the church bulletin, brochures, etc.), display on the Church website, or use quotes and video clips on the Church's website and blog. I also understand that publication of these photographs and/or videos may be accomplished electronically via the internet/world wide web and that after publication the Church and Ministry will be unable to prevent persons from gaining access to the internet/World Wide Web, copying photographs and video there from, and subsequently using, altering or republishing without my consent. I waive any claim for damages against the Church from the unconsented use, alteration or republication of photographs and video by third parties accessing the internet/World Wide Web.

Initial_____

Discipline Policy

Our ministry seeks to create an environment of activities and programs that will, while working alongside the families, train and educate students towards maturity in Christ. A component of this environment includes certain behavior and cooperation standards that the students are expected to follow. By signing below you comply to respect the standards. These standards include:

- No possession or use of alcohol, drugs or tobacco.
- No fighting, weapons, fireworks, lighters or explosives.
- No sexual misconduct (defined as exposure, touching or inappropriate reference to body areas normally covered by undergarments).
- No offensive or immodest clothing.
- Participants will avoid the use of foul language, cursing or any speech (including "humor") which puts down, makes fun of, or stereotypes other persons or groups.
- Coed visitation/fellowship to take place only in assigned areas. Sleeping areas for males and females will be separate.
- Participants will be respectful of FBA property and the property of others.
- Participants will be respectful, encouraging and will maintain a positive attitude toward others at all times, recognizing Christ's presence in each other.

MINOR/STUDENT:

Signature

Printed Name

THIS IS A RELEASE OF LEGAL RIGHTS. READ AND BE CERTAIN YOU UNDERSTAND IT BEFORE SIGNING. THIS RELEASE SHALL REMAIN VALID FOR ONE YEAR FROM DATE OF SIGNING AND WILL APPLY TO ALL EVENTS/ ACTIVITIES DURING THAT YEAR.

PARENT/LEGAL GUARDIAN:

WITNESS:

Signature

Signature

Printed Name

Printed Name

Date