



EVENT PERMISSION/MEDICAL RELEASE

Please Print Clearly:

Child's Name: _____ Date of Birth _____/_____/_____

Parent or Legal Guardian: _____ Phone: (_____)_____

Emergency Contact: _____ Relation to Child: _____ Phone: (_____)_____

I, _____, give my permission and authorization in the event

(Parent having legal custody of child)

of an emergency where medical attention is required, for Church in the Son Staff or Sponsor to obtain the services of a licensed physician or emergency medical technician or to perform any acts necessary to provide emergency health care for

_____. Please notify me immediately concerning such an emergency. This

(Minor Child)

consent shall be effective throughout my child's attendance and participation in the **PreK Vacation Bible School July 8-10, 2025** at Church In The Son, 4484 N. John Young Pkwy, Orlando, FL 32804, including activities preliminary and subsequent thereto.

In the event that my child should require medical care or treatment, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

Medical Information

Please check all that apply:

☐ My child has food allergies. If checked, please list allergies below:

☐ My child has drug allergies. If checked, please list allergies below:

☐ My child has a medical condition or special need that the event leadership and group leader should be aware of. If checked, please list any and all conditions below (use back of page if necessary):

☐ (At time of event) My child is currently taking medication. If checked, please list medications below:

WAIVER AND RELEASE OF LIABILITY

In consideration of the risk of injury while participating in **Vacation Bible School** (the "Activity"), and as consideration for the right to participate in the Activity, I hereby, for myself, my heirs, executors, administrators, assigns, or personal representatives, knowingly and voluntarily enter into this waiver and release of liability and hereby waive any and all rights, claims or causes of action of any kind whatsoever arising out of my participation in the Activity, and do hereby release and forever discharge Church In The Son, located at 4484 N John Young Pkwy, Orlando, Florida 32804, their affiliates, managers, members, agents, attorneys, staff, volunteers, heirs, representatives, predecessors, successors, directors, officers, and assigns (such persons, collectively and individually hereinafter referred to as "The Church Released Parties"), for any physical or psychological injury, including but not limited to illness, paralysis, death, damages, economical or emotional loss, that I may suffer as a direct result of my participation in the aforementioned Activity, including traveling to and from an event related to this Activity.

I AM VOLUNTARILY PARTICIPATING IN THE AFOREMENTIONED ACTIVITY AND I AM PARTICIPATING IN THE ACTIVITY ENTIRELY AT MY OWN RISK. I AM AWARE OF THE RISKS ASSOCIATED WITH TRAVELING TO AND FROM AS WELL AS PARTICIPATING IN THIS ACTIVITY, WHICH MAY INCLUDE, BUT ARE NOT LIMITED TO, PHYSICAL OR PSYCHOLOGICAL INJURY, PAIN, SUFFERING, ILLNESS, DISFIGUREMENT, TEMPORARY OR PERMANENT DISABILITY (INCLUDING PARALYSIS), ECONOMIC OR EMOTIONAL LOSS, AND DEATH. I UNDERSTAND THAT THESE INJURIES OR OUTCOMES MAY ARISE FROM MY OWN OR OTHERS' NEGLIGENCE, CONDITIONS RELATED TO TRAVEL, OR THE CONDITION OF THE ACTIVITY LOCATION(S). NONETHELESS, I ASSUME ALL RELATED RISKS, BOTH KNOWN OR UNKNOWN TO ME, OF MY PARTICIPATION IN THIS ACTIVITY, INCLUDING TRAVEL TO, FROM AND DURING THIS ACTIVITY.

I agree to indemnify and hold harmless Church In The Son against any and all claims, suits or actions of any kind whatsoever for liability, damages, compensation or otherwise brought by me or anyone on my behalf, including attorney's fees and any related costs, if litigation arises pursuant to any claims made by me or by anyone else acting on my behalf. If Church In The Son incurs any of these types of expenses, I agree to reimburse Church In The Son.

I acknowledge that Church In The Son and The Church Released Parties are not responsible for errors, omissions, acts or failures to act of any party or entity conducting a specific event or activity on behalf of Church In The Son.

I ACKNOWLEDGE THAT THIS ACTIVITY MAY CARRY WITH IT POTENTIAL RISK. The risks may include, but are not limited to, those caused by terrain, facilities, temperature, weather, lack of hydration, condition of participants, equipment, vehicular traffic and actions of others, including but not limited to, participants, volunteers, spectators, coaches, event officials and event monitors, and/or producers of the event.

I ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS "WAIVER AND RELEASE" AND FULLY UNDERSTAND THAT IT IS A RELEASE OF LIABILITY. I EXPRESSLY AGREE TO RELEASE AND DISCHARGE CHURCH IN THE SON AND THE CHURCH RELEASED PARTIES, FROM ANY AND ALL CLAIMS OR CAUSES OF ACTION AND I AGREE TO VOLUNTARILY GIVE UP OR WAIVE ANY RIGHT THAT I OTHERWISE HAVE TO BRING A LEGAL ACTION AGAINST CHURCH IN THE SON FOR PERSONAL INJURY OR PROPERTY DAMAGE.

The terms of this Waiver and Release of Liability apply regardless of the cause or theory of action asserted against the Church Released Parties, whether in law or equity, contract or tort, for all acts and omissions, including negligence, to the greatest extent permitted by Florida law.

In the event that any damage to equipment or facilities occurs as a result of my or my family's willful actions, neglect or recklessness, I acknowledge and agree to be held liable for any and all costs associated with any actions of neglect or recklessness.

This Agreement was entered into at arm's-length, without duress or coercion, and is to be interpreted as an agreement between two parties of equal bargaining strength. Both the

I and Church In The Son agree that this Agreement is clear and unambiguous as to its terms, and that no other evidence will be used or admitted to alter or explain the terms of this Agreement, but that it will be interpreted based on the language in accordance with the purposes for which it is entered into.

In the event that any provision contained within this Release of Liability shall be deemed to be severable or invalid, or if any term, condition, phrase or portion of this agreement shall be determined to be unlawful or otherwise unenforceable, the remainder of this agreement shall remain in full force and effect, so long as the clause severed does not affect the intent of the parties. If a court should find that any provision of this agreement to be invalid or unenforceable, but that by limiting said provision it would become valid and enforceable, then said provision shall be deemed to be written, construed and enforced as so limited.

I, the undersigned participant, affirm that I am of the age of 18 years or older, and that I am freely signing this agreement. I certify that I have read this agreement, that I fully understand its content and that this release cannot be modified orally. I am aware that this is a release of liability and a contract and that I am signing it of my own free will.

I the undersigned expressly assume the risk of all foreseeable and unforeseeable possibilities of injury or death inherent in these activities.

I hereby certify that I am the parent or guardian of _____, named above, and do hereby give my
(Name of Child)
consent without reservation to the foregoing on behalf of this individual.

Signature of Parent or Guardian

Date: ____/____/2025