**MERCER ISLAND PRESBYTERIAN CHURCH**

**ARK MINISTRIES TO CHILDREN AND THEIR FAMILIES**

**CONSENT & RELEASE FORM 2018**

**Contact:** Kim Jewett; phone (206)232-5595 x1005 or email [kimj@mipc.org](mailto:kimj@mipc.org)

**□ MOVIE PARTICIPANT**

**Child’s Name**: \_\_\_\_\_\_\_ \_\_\_ **Date Of Birth**: **Grade:**

**School**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Allergies:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parents/Guardian Name #1: Cell Phone#1:

Address #1: \_\_\_ City & Zip:

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

Parents/Guardian Name #2: Cell Phone#2:

**Contact during movie: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**□PARENT/GUARDIAN PERMISSION & LIABILITY RELEASE:**

The undersigned does hereby give permission for my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to attend and participate in any MIPC children’s ministry activities and events during the period of January 1, 2018 – June 1, 2018.

LIABILITY: By granting permission for my child to attend, I also waive any claims against MIPC, release, defend, indemnify, and agree to hold harmless MIPC, its pastors, elders, directors, employees, volunteers and teachers (collectively herein the “church”) from any and all liability, claims or demands arising out of or relating to accidental personal injury, sickness or death, as well as property damage and expenses, of any nature which incurred by the undersigned and the Participant while involved in the activities. \_\_\_\_\_\_\_\_\_ Initial

MEDICAL: I authorize an adult, in whose care the minor has been entrusted, to consent to all emergency medical and surgical treatment, X-ray, laboratory, anesthesia, and other medical and/or hospital procedures as may be performed or prescribed by the attending physician and/or paramedics for my child and waive my right to informed consent of treatment. The undersigned shall be liable and agrees to pay all costs and expenses incurred in connection with such medical and dental services rendered to the child. Medical Insurance Policy:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ Initial

PHOTO: I grant permission to Mercer Island Presbyterian Church to use the image of my child in printed and digital materials that may include, but may not be limited to brochures and newsletters, videos, and digital images such as those on the MIPC Web site. \_\_\_\_\_\_\_\_\_ Initial

**Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**