



Full Gospel Baptist Church Fellowship International Children & Youth Division CONSENT/LIABILITY FORM

To Whom It May Concern:

I (We) the parent/legal guardian do hereby give permission for our/my child _____,

To attend and participate in activities and events sponsored by the Full Gospel Baptist Church Fellowship International, specifically its International Youth Conference 2010 on July 7-9, 2010 in Atlanta, Georgia. In allowing my child to attend this conference, I agree to enforce and encourage my child to follow the rules and regulations set out by the Full Gospel Baptist Church Fellowship International. All youth are to be released into the hands of a qualified chaperone. I (We) understand that no youth will be allowed to freely roam without a chaperone, nor will they be released until the set time for their session(s) to end. Youth are to be escorted by chaperones, AT ALL TIMES.

We (I) authorize an adult chaperone, in whose care the youth has been entrusted, in the event of an emergency to consent to any X-Ray examination, anesthetic, medical, surgical diagnosis, or treatment and hospital care, to be rendered to the minor under the general supervision and on the advice of any physician under provision of the Medical Practice Act on the medical staff of a licensed hospital.

I, the parent/guardian will be liable and agree to pay all cost and expenses incurred in connection with such medical services rendered to my child. Should it become necessary for our/my child to return home due to medical reasons or otherwise, I the parent/guardian agree to assume all transportation cost.

I, the parent/guardian do also give permission for my/our child to ride in any vehicle designated by the adult chaperone in whose care the minor has been entrusted while attending and participating in activities sponsored by the Full Gospel Baptist Church Fellowship International, International Youth Conference 2010.

I, the parent/legal guardian do hereby release, forever discharge and agree to release the Full Gospel Baptist Church Fellowship International and the directors thereof from any and all liability, claims, or demands.

Hospital Insurance Coverage: Yes No

Medical Insurance Company: _____ Policy #: _____

Main/Primary Holder: _____ Emergency Phone: _____

Medication/Allergies: _____

Medical Conditions: _____

Current Medication: _____

Signature of Parent/Legal Guardian

Date

Signature of Chaperone/Ministry Representative

Date

Full Gospel Baptist Church Fellowship International
MEDICAL TREATMENT RELEASE FORM

As a parent/guardian, I do hereby authorize the treatment of named minor, by a qualified and licensed Medical Doctor in an emergency which, in the opinion of the attending physician, may endanger his/her life, cause disfigurement, physical impairment, or undue discomfort if delayed. This authority is granted only after a reasonable effort has been made to reach me.

Name of Minor: _____ DOB: ___/___/___ Grade: _____
Address of Minor: _____ City/State: _____
Home Phone: _____ Cell Phone/Emergency Phone: _____

Printed Name of Parent/Guardian(s): _____

In case of emergency, contact:

1. Name: _____ Relationship: _____
Daytime Phone: _____ Evening Phone: _____
Address: _____ City/State: _____

2. Name: _____ Relationship: _____
Daytime Phone: _____ Evening Phone: _____
Address: _____ City/State: _____

Family Physician: _____ Phone: _____
Physician Address: _____ City/State: _____

List allergies, medication, or other medical conditions: _____

Other medical conditions that you should be aware of, are: _____

Health Insurance: Policy Holder's Name: _____
Policy Number: _____
Group #: _____
Company: _____

Reason for which release is intended: FGBCFI International Conference

This release form is completed and signed on my own free will with the sole purpose of authorizing medical treatment under emergency circumstances in my absence.

This form must be completed for your child(ren) to travel with the _____ (local ministry).

Date

Signature of Parent(s)/Legal Guardian(s)

**Full Gospel Baptist Church Fellowship International
Permission and Release Agreement**

We, the undersigned parents and/or legal guardians of _____, hereby agree that _____ will participate in the _____ (event) to be held on _____ (date). We give permission for our child to ride in church vans, buses, or vehicles driven by qualified adult drivers. We realize that our child may be injured and therefore, in order that our child may participate, agree as follows: We agree that neither Full Gospel Baptist Church Fellowship International (FGBCFI), nor any contributor of the event, their members, employees, agent, sponsors, officers, directors, or officials will be held responsible for any injuries that our child might incur in conjunction with the above event.

We release and forever discharge FGBCFI and any contributor of the event, their members, employees, agents, sponsors, officers, directors, or officials from any injury that our child might incur, including death, and from any and all claims, demands, damages, actions, and causes of action whatever kind and nature which might occur. As further consideration for allowing our child to participate in this event, we further agree to indemnify and hold harmless FGBCFI, and any contributor of the event, their members, employees, agents, sponsors, officers, directors, or officials from any claims or actions and costs, brought by us or any other party on our behalf on account of any claims, damages, actions, and causes of action of whatever kind and nature arising out of the aforesaid event.

THIS IS A RELEASE. PLEASE READ CAREFULLY BEFORE SIGNING.

WE HAVE READ THE ABOVE AND FULLY UNDERSTAND ITS PROVISIONS:

Signature of Parent(s)/Legal Guardian(s)	Date
Printed Name of Parent(s)/Legal Guardian(s)	Date
Signature of Child	Date

Here are some common questions about the need for these release forms for your child for FGBCFI activities:

- Q: Why are these forms needed in the first place?**
- A: These forms ensure the protection of the ministry, any staff, or volunteers that are involved, as well as the youth participating in the event, program, and/or activity.
- Q: Who can I talk to if I have more questions about this?**
- A: Please feel free to visit, call, or email the FGBCFI Children & Youth Division at your convenience. Their contact information is listed below.

FGBCFI International Children & Youth Division
General Overseer Christopher J. Harris
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Greensboro, NC 27417
336.327.0803 (Office) / 336.458.9612 (Fax)
fgyouth@aol.com