

WESTWOOD CHURCH WAIVER/PERMISSION FORM

September 1, 2015 – August 31, 2016

Name of Child _____

Address _____

City _____ State _____ Zip _____ Phone _____

Birth Date: _____ School Grade: _____

List primary adults living at home address:

Adult Name: _____ Relationship: _____

Work number: _____ Cell number: _____

Adult Name: _____ Relationship: _____

Work number: _____ Cell number: _____

Legal Guardians' email _____

Name of Child's School _____

Functions and Activities

It is my understanding that participating in the programs and recreational and other activities of Westwood Church is a privilege. Prior to my own/child's participation in such activities, I acknowledge that there are certain risks associated with the activities, including, by way of example, physical injury due to activity-related accidents, physical injury due to transportation-related accidents, illness, or even death. In addition, I acknowledge that there may be other risks inherent in these activities of which I may not be presently aware.

Release of Liability

By signing this Permission/Waiver Form, I expressly warrant that the child named above is capable of withstanding both the physical and mental demands of the activities discussed above. I also expressly assume all risks of the child when participating in the activities, whether such risks are known or unknown to me at this time. I further release Westwood Church and its staff, leaders, employees, volunteers, and agents from any claim that my child may have or that I may have against them as a result of injury or illness incurred during the course of participation in the activities. This release of liability is also intended to cover all claims that members of the child's or my family or estate, heirs, representatives, or assigns may have against Westwood Church or its staff, leaders, employees, volunteers, or agents. I further agree to indemnify and hold harmless Westwood Church and its staff, leaders, employees, volunteers, or agents from any and all claims arising from my participation in its activities and programs, or as a result of injury or illness of my child during such activities.

Photography

I authorize Westwood Church to include myself/child in pictures for promotional purposes of events he/she is participating in. I understand that my child's full name will not be published with the pictures he/she are in.

Parent or Legal Guardian Date _____ Digital Signature of

(by typing your name in the signature place above you are electronically signing this form)