## Fort Garry EMC Youth Permission Form 2021/2022

Youth Name:
Age:
Grade:
Birthday:
Youth Cell Phone:
Youth Email Address:
Home Address:
Home Phone:
Best way to contact:
1) Parent/Guardian Name:
Cell Phone:
Email:
Best way to contact:
2) Parent/Guardian Name:
Cell Phone:
Email:
Best way to contact:
Health Information
9 Digit Health Card Number:
6 Digit Health Card Number:
Family Doctor:
Phone Number:
Allergies:
Emorgonay Contact
Emergency Contact:

## Permission:

I hereby consent to the attendance of my child, at all regularly scheduled meetings of the youth program, as published in the official youth schedule (sent by email and posted in the newsletter), for the youth program season of September 2021-August 2022. Typically there will be weekly events, most often in the church building or at King's Park. Details of events will be posted in advance. By signing this form, I acknowledge that I understand that the events in the schedule described above may take place on or off Fort Garry EMC Church property as indicated by the particular event description.

I consent to my child being photographed or taking part in a video recording for internal purposes (ie. a youth directory, archival records,) and for anonymous group pictures/videos to be posted on social media or in the church worship services or newsletter.

Parent/Guardian Signature:	
Date:	

\*\*READ CAREFULLY BEFORE SIGNING\*\* ALTHOUGH THIS WAIVER IS REQUIRED TO AT-TEND, BY SIGNING THIS FORM YOU MAY BE WAIVING CERTAIN LEGAL RIGHTS YOU AND/OR YOUR DEPENDENTS MAY HAVE.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I (and my children) may be exposed to or infected by COVID-19 by attending Fort Garry EMC Church Events and that such exposure or infection may result in personal illness, injury, permanent disability, or death.

I understand that if I am 60 years of age or older, or if I am immunocompromised due to medication or an existing health condition or disease, I may be more susceptible to death or serious illness from COVID-19 and am taking increased measures to avoid infection, including wearing a face mask, social distancing or participating in online services.

I understand that the risk of becoming exposed to or infected by COVID-19 at Fort Garry EMC CHURCH may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Fort Garry EMC employees, volunteers, attendees, program participants and their families.

I agree while on premises or while participating in off-premises activities events of Fort Garry EMC CHURCH to abide by all rules and recommendations posted in signs on the premises and otherwise communicated in writing or verbally by Fort Garry EMC Church, its directors, officers, employees and volunteers, to protect my health and safety, including minors in my care.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any illness or injury to myself (or to my children), including, but not limited to, personal injury, disability, death, damage, loss, claim, liability, or expense, of any kind, that I (or my children) may experience or incur in connection with my (or my children's) attendance at Fort Garry EMC Church or participation in its events, programs or activities.

On my behalf (and on behalf of my children), I hereby release, covenant not to sue, discharge, and hold harmless Fort Garry EMC Church, its officers and directors, members, employees, volunteers, agents and representatives, of all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto.

I understand and agree that this release includes any all liabilities, claims, actions, damages, costs or expenses of any kind based on the actions, omissions, or negligence of Fort Garry EMC Church,

its directors or officers, employees, volunteers, agents and representatives, whether a COVID-19 infection occurs before, during, or after participation in any Fort Garry EMC Church program or activity.	
Full Legal Name of Attendee, Parent or Guardian	