## January 2019-December 2019 Medical / Civil Liability Release and Permission Form Christ Community Church 8285 Ryan Road

I	the legal guardian of	, give
permission to go out of town and au administration of general first aid for December 2019. If the injury sustair authorize the leadership of Christ Co	Ithorize the leadership of Christ Communication injuries received to my child ned is life threatening, or in need of emonomorality Church or its representatives to attend. transport and treat my child.	unity Church to care for the d during January 2019 to ergency treatment, I
I understand that Christ Community schedule, and may not be under tot	Church will require my son/daughter to al adult supervision at all times.	make choices, keep a
	s any staff and lay assistants of Christ ( actions, of any kind whatsoever, arising	_
Signature:	Date:	
Name:		
Primary phone:		
Emergency Contact:	Emergency Phone:	
Doctor:	Phone:	
Insurance Company:		
Policy Number:		
Known Allergies:		
<b>MINOR (</b>	CHILD) PHOTO RELEASE FOR the parent or legal guardian of	M
	my permission to use the photographs des	scribed as
	ding but not limited to: publicity, copyright p	•
become payable to me by reason of su	nore, I understand that no royalty, fee or oth sch use.	ner compensation shall
Parent/Guardian's Signature:	Date	-
Parent/Guardian's Name:		
Child's Name:		
Phone Number:		