



Annual Permission/Consent/Liability Release Form February 6, 2025 - January 6, 2026

Please complete & return this form to MHC administration or ministry leader

Student's Full Legal Name: _____ Age: _____ Birth Date: _____

Address: _____

School: _____ Grade: _____

Parent/Guardian Name(s): _____ / _____

Work Phone(s)/Cell Phone(s): _____ / _____

TO WHOM IT MAY CONCERN

The undersigned hereby give(s) permission for our (my) child: _____
("Participant") to attend and participate in Mission Hills Church events, and retreats from **February 6, 2025 through January 6, 2026**

LIABILITY RELEASE

In consideration of Mission Hills Church allowing the Participant to participate in Mission Hills Church Student Ministries activities, we (I), the undersigned, do hereby release, forever discharge and agree to hold harmless Mission Hills Church, its directors, employees, volunteers and agents (collectively herein the "Church") from any and all liability, claims or demands for accidental personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever (including attorneys fees) which may be incurred by the undersigned and the Participant while involved in those activities. We (I), the parent(s) of this Participant, hereby grant our (my) permission for the Participant to participate fully in Mission Hills Church Student Ministries activities, including trips away from the Church premises.

Furthermore, we (I) [and on behalf of our (my) minor Participant] hereby assume all risk of accidental personal injury, sickness, death, damage, and expense as a result of participation in recreation and work activities involved therein. Authorization and permission is hereby given to the Church to furnish any necessary transportation (within the limitations of Church insurance and the law), food, and lodging for the Participant. The undersigned agree(s) to hold harmless and indemnify the Church for any liability sustained by the Church as a result of negligent, willful or intentional acts of Participant, including expenses incurred attendant thereto.

TRANSPORTATION PERMISSION

The undersigned does also hereby give permission for the Participant to ride in any vehicle/boat driven by an approved ADULT chaperone while attending and participating in activities sponsored by the Church. The Participant and I understand that SEAT BELTS SHALL BE WORN AT ALL TIMES during transportation.

PHOTOGRAPH / VIDEO PERMISSION

All photos, videos, and audio tapes of the Participant captured by Mission Hills Church are also released to Mission Hills Church for promotional purposes such as brochures, videos, web pages, etc.

>>> PLEASE COMPLETE SIDE TWO OF THIS FORM

MEDICAL INFORMATION

Covered by medical insurance: YES: ____ NO: ____

Insurance Company: _____ Policy/Group ID #: _____

Allergies or Medical Conditions:

Prescriptions or Medicines:

If needed, do you authorize the giving of over-the-counter pain medicine (e.g. Tylenol or Advil) to your student?

YES: ____ NO: ____

Our ministry seeks to create an environment of activities and programs that will, while working alongside the families, train and educate students towards maturity. A component of this environment includes certain behavior and cooperation standards that the students are expected to follow. These standards include:

- No possession or use of alcohol, drugs, or tobacco
- No students can drive other students without written parental consent
- No fighting, weapons, fireworks, lighters, or explosives
- No offensive or immodest clothing
- No boys in girls' sleeping quarters and no girls in boys' sleeping quarters
- Participation with the group is expected
- Respect and a cooperative attitude
- Respect the rights and property of others
- Respect one another, staff, and adult leaders
- Respect and comply with event schedules
- Following the direction of the staff leadership

Students who fail to comply with these expectations may be sent home at the expense of their parents.

EMERGENCY CONTACT INFORMATION

Name of Emergency Contact (if Parent/Guardian cannot be reached) _____

Relationship to Participant: _____ Phone Number: _____

STUDENT/PARTICIPANT AND PARENT/GUARDIAN SIGNATURES

My signature on this annual Permission / Consent / Liability Release Form is an acknowledgement that I have read and understand these guidelines. I recognize that this is a permission slip, medical release, liability release, and covenant for the time period of **February 6, 2025 - through January 6, 2026**. I commit to abide by the provisions of this Release Form and submit it to Mission Hills Church.

Parent/Guardian Signature: _____ Date: _____

Email: _____