

Parental Release for Use of Student Images in all Formats

Unless otherwise noted below, I (we) authorize the First United Methodist Church, Niceville, Florida and those acting with its permission and under its authority, to use and publish recognizable images of my child (named on front of this form) in any medium deemed appropriate, but not limited to:

- a. Web Pages
- b. Newspapers
- c. TV (local broadcasts to homes)
- d. Multimedia presentations
- e. Pictures for professional journals/brochures

I (we) DO NOT authorize the use of recognizable images of my child (named on front of this form)

I (we) warrant that we are the guardian and/or parents of the above named child and have full right to contract on behalf of said child.

Parent's Signature

Date

Liability Release Form

In consideration for being accepted by Niceville First United Methodist Church for participation in the Children's Ministry for all recreational events, trips, fellowships, and regularly planned events from June 2008 to August 2009. I being 21 years of age or older, do for myself and for and on behalf of my child participate (if said child is under 21 years of age) do hereby release, forever discharge and agree to hold harmless Niceville First United Methodist Church and the directors thereof from any and all liability, claims or demands for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the child participant that occur while I or said child is participating in the activity.

Furthermore, I, and on behalf of my child participant, hereby assume all risk of personal injury, sickness, death, damage and expense as a result of participation in recreation and work activities involved therein.

Further authorization and permission is hereby given to said church to furnish any necessary transportation and food for this participant, as required.

The undersigned further agrees to hold harmless and indemnify said church, its directors, employees, and agents, for any liability sustained by said church as the result of the negligent, willful, or intentional acts of said participant, including expenses incurred attendant thereto, if the participant has not attained the age of 21 years.

I am the parent or legal guardian of this participant (if under the age of 21 years), and hereby grant my permission to take said participant to a doctor or hospital and hereto authorize medical treatment including but not in limitation to emergency surgery or medical treatment, and assume the responsibility of all medical bills incurred, if any.

Further, should it be necessary for the participant to return home due to medical reasons, disciplinary action or otherwise, I hereby assume all transportation costs.

Type or Print Name of Participant

Signature of Parent/Guardian

Home Phone

Date

Hospital Insurance Company

Policy and Group Number

Physician's Name and Phone Number

Emergency Contact Phone Numbers