

RHFC YOUTH MINISTRIES

2021 CONSENT FORM

The undersigned does hereby give permission for my child, _____ to **attend and participate** in activities sponsored by Rose Hill Friends Church during the year 2021.

I have reviewed the **rules of the activities** and agree that the subject of this release will abide by them. I also acknowledge that if the subject of the release has to return home early for discipline violations, medical reasons or otherwise, it will be at my expense.

I understand all reasonable **safety precautions** will be taken at all times by Rose Hill Friends Church during the events and activities. I authorize any treatment by an accredited hospital and/or physician deemed necessary for the subject of the release in case of an emergency. I understand the possibility of unforeseen hazards and know the inherent possibility of risk.

I agree not to hold Rose Hill Friends Church, its leaders, employees, and volunteer staff liable for damages, losses, diseases, or injuries incurred by the subject of this form.

The undersigned does also give permission for my child to **ride in any vehicle** designated by the adult in whose care the minor has been entrusted while attending and participating in activities sponsored by Rose Hill Friends Church.

Statement of Understanding and Release of Liability in Regard to COVID-19

In order for this event to occur, Rose Hill Friends Church has put in place reasonable preventative measures and standards of behavior to reduce the spread of COVID-19. Even with implementation of safety protocols, the church or church leadership cannot guarantee that you or your child(ren) will not become infected with COVID-19; attendance at any events and/or participation in any church related activities could increase your risk and/or your child(ren)'s risk of contracting COVID-19.

ASSUMPTION OF RISK: Rose Hill Friends Church cannot prevent you or your child/children from becoming exposed to, contracting, or spreading COVID-19 while attending church events and related activities. It is not possible to prevent against the presence of the disease. Therefore, if you choose for your children to attend RHFC programs, your child and/or other family members may be exposed to and/or at increased risk of contracting or spreading COVID-19.

By signing below:

I have read and understood the above warning concerning COVID-19.

I hereby choose to accept the risk of contracting COVID-19 for myself, my child/children, and/or other family members in order for my child/children, to attend church programs and related activities.

I hereby forever release and waive my right to bring suit against Rose Hill Friends Church and its owners, officers, directors, managers, officials, trustees, agents, employees, authorized volunteers, or other representatives in connection with exposure, infection, and/or spread of COVID-19 related to the church. I understand that this waiver means I give up my right to bring any claims including for personal injuries, death, disease or property losses, or any other loss, including but not limited to claims of negligence and give up any claim I may have to seek damages, whether known or unknown, foreseen or unforeseen.

Parent/Guardian Name (Please Print)

Student Name

Parent/Guardian Signature

Date

Address/City/Zip

(H) Phone #

(C) Phone #

Health/Med. Insurance Company

Policy Number

Please list any **allergies** and/or **medical conditions** the subject of this release may have. Also list any **prescription medication** he/she may be taking at this time.