

**PRESBYTERIAN CHURCH OF NOVATO**  
**2016-2017 Liability Release Form page 2**

**Legal Information**

In consideration for being accepted by Presbyterian Church of Novato (PCN) for participation in any event administratively organized by PCN or any of its officers, directors, employees, and agents, during June 1, 2016 through May 31, 2017, we (I), being 18 years of age or older, do for ourselves (myself) [and for and on behalf of my child-participant if said child is not 18 years of age or older] do hereby release, forever discharge and agree to hold harmless PCN and its officers, directors, employees, and agents from any and all manner of suit, 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 while the said child-participant is participating in any event administratively organized by PCN or any of its officers, directors, employees, and agents.

Furthermore, we (I) recognize that the conditions in some of the places to which said participant will be traveling are not of the same standards as the conditions to which we (I) are (am) accustomed. We (I) recognize further that there are certain health risks as well as other risks to participants and their property. Therefore, we (I) [and on behalf of our (my) child-participant if under the age of 18 years] hereby assume all risk of personal injury, sickness, death, damage and expense as a result of participation in recreation and work activities involved herein.

Further, authorization and permission is hereby given to PCN to furnish any necessary transportation, food, and lodging for said participant.

The undersigned further hereby agree to hold harmless and indemnify PCN, its officers, directors, employees, and agents, for any liability sustained by PCN as a result of the negligent, willful or intentional acts of said participant, including expenses incurred attendant thereto.

We (I) understand that the document constitutes a full and complete waiver of all possible claims, including, but in no way limited to, claims for negligence in personal or property damages arising out of said participant's involvement in any event administratively organized by PCN or any of its officers, directors, employees, and agents.

No provision of this document shall, in any way, limit my right to make claims against persons other than PCN, its officers, employees and agents.

*[If the participant has not attained the age of 18 years]:*

We (I) are the parents(s) or legal guardian(s) of this participant, and hereby grant our (my) permission for him/her to participate fully in said trip/activity, and hereby give our (my) permission to take said participant to a doctor or hospital and hereby authorize medical treatment, including but not in limitation to emergency surgery or medical treatment, and assume the responsibility of all medical bills, if any. We (I) understand that a conscientious effort must be made to notify one of the parents or legal guardians listed below before such action is taken.

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

This authorization is given pursuant to the provisions of § 25.8 of the Civil Code of California.

**PARENT/GUARDIAN MEDIA PERMISSION FOR CHILDREN ATTENDING PCN  
FUNCTIONS**

I give permission to the Presbyterian Church of Novato (PCN) to take video and photographic images of my child in the PCN youth programs. I acknowledge that such images may appear in PCN publications such as our monthly newsletters/internal flyers, worship settings, and websites without compensation to me or my child, and that these images will become the property of PCN. No child will be identified by name or location.

**By checking the box below I withhold my permission for my child to appear in any images relating to PCN publications or the website:**  \_\_\_\_\_ (Parent's Name)

\_\_\_\_\_  
(Type or print the name of the participant)

\_\_\_\_\_  
Parent/Custodial Parent/Legal Guardian Signature

*(By signing this document you are declaring that you have read the above information regarding the church's liability and are giving permission for your student to participate in the activities of PCN. If the child is under 18 we need one signature from a parent, legal guardian or in the case of parents that are separated/divorced the custodial parent must sign.)*

**Presbyterian Church of Novato**  
**2016-2017 Liability and Release Form**

**PARENTAL INFORMATION**

Parent(s) or Legal Guardian(s) name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone Number : \_\_\_\_\_

*Additional adults who are authorized to pick up child/ren:*

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name: \_\_\_\_\_ Phone \_\_\_\_\_

### MEDICAL INFORMATION

Hospital Insurance?  Yes  No

Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Physicians' Name \_\_\_\_\_ Phone Number: \_\_\_\_\_

### PARTICIPANT INFORMATION

Participants Name \_\_\_\_\_ Participant's Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Grade Level in school in the fall: \_\_\_\_\_ School Name: \_\_\_\_\_

Allergies:  Yes  No If yes, please list: Do they have an Epipen?  Yes  No

Any special medical or other pertinent information:  Yes  No If yes, please list:

Limitations for Activities:  Yes  No If yes, please list:

**NOTE: This form is incomplete without a parent/legal guardian signature on next page.**