

**Permission Form Waiver**

I \_\_\_\_\_, the parent/guardian of \_\_\_\_\_ ("my child/children"), give permission for my child to attend the **AWANA program at First Baptist Church of Junction City.**

I understand that personal injury can and may occur to my child, and I hereby authorize **a volunteer representative of First Baptist Church of Junction City** to seek and consent to emergency medical attention for my child as needed; and I further agree to be liable for and to pay all costs incurred in connection with such medical attention.

I hereby release **First Baptist Church of Junction City**, its employees, and volunteers, from any and all liability, claims, demands, causes of action and possible causes of action whatsoever arising out of or related to any loss, damage or injury that may be sustained by my child while participating in this program.

**Insurance information:**

Company \_\_\_\_\_ Policy/ID # \_\_\_\_\_  
Restrictions \_\_\_\_\_  
Allergies \_\_\_\_\_  
Medication \_\_\_\_\_

\_\_\_\_\_ By Initialing here, I give permission for my child to ride in any vehicle designated by **First Baptist Church of Junction City**, its employees and adult volunteers, while traveling to and from this program.

\_\_\_\_\_ By Initialing here, I give permission for my child to be photographed by adult volunteers designated by **First Baptist Church of Junction City**, while participating in this program for the purpose of promoting this program.

I agree to accept full responsibility, financially or otherwise, for any damage or personal injury to others my child may cause (including damage to vehicles used for transportation) while participating in AWANA at **First Baptist Church of Junction City.**

I agree and consent to all of the above stated.

\_\_\_\_\_ (Parent Signature) \_\_\_\_\_ (Phone Number) \_\_\_\_\_ (Date)

\_\_\_\_\_ (Alternate Emergency Contact Name and Phone Number)

