

# Family Night Registration Form

***Please include everyone with you tonight on this form!***

Child 1 name: \_\_\_\_\_ Gender: \_\_\_\_\_ Age: \_\_\_\_\_

Child 2 name: \_\_\_\_\_ Gender: \_\_\_\_\_ Age: \_\_\_\_\_

Child 3 name: \_\_\_\_\_ Gender: \_\_\_\_\_ Age: \_\_\_\_\_

Child 4 name: \_\_\_\_\_ Gender: \_\_\_\_\_ Age: \_\_\_\_\_

Child 5 name: \_\_\_\_\_ Gender: \_\_\_\_\_ Age: \_\_\_\_\_

Child 6 name: \_\_\_\_\_ Gender: \_\_\_\_\_ Age: \_\_\_\_\_

Mother's name: \_\_\_\_\_

Father's name: \_\_\_\_\_

*Parents/Guardians: Please note - if the medical release is not signed, your family will not be able to participate in ANY activities or events. This release is valid until redacted in writing by parents.*

Release: To the fullest extent permitted by law, I release [YOUR CHURCH NAME], its trustees, officers, directors, employees, agents and representatives from any illness, injury, harm, damage or death which may occur to any children and adults listed above while participating in church activities. I agree to save and hold harmless [YOUR CHURCH NAME], its employees, volunteers and representatives from any claims arising out of my family's participation in the activity.

General: I give my consent for my child(ren) to attend meetings, activities and events, both on site and off site. I will be provided specific event information in advance of any off-site activity.

Medical: In the event of a medical emergency and when a contact cannot be made to me and/or the emergency contact listed, I give my permission for my child(ren) to receive appropriate medical attention. In the event of an emergency or accident, I release [YOUR CHURCH NAME], its employees and volunteers, and all those related to it, from any liability. I will be contacted as soon as possible in the event of an emergency.

Transportation: Should transportation be needed, I agree to allow my child(ren) to ride with church staff or volunteers. Appropriate safety standards will be maintained and children will always be provided seatbelts. If no such permission is granted, I agree to transport my child(ren) to and from any offsite event. I understand that it is my child(ren)'s responsibility to wear his/her seatbelt.

Photograph release: Photos may be taken church activities. I grant permission for [YOUR CHURCH NAME] to post photos including my family on its website, social media or in other church publications.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_