PARENTS/GUARDIANS CONSENT FORM POCAHONTAS BAPTIST CHURCH

PARTICIPANT			
ADDRESS			
PARENTS/GUAR	DIANS		
CITY	STATE	ZIP CODE	PHONE
AGE	BIRTH DATE		
	gned parents/guardia permission for the pa		amed participant, grant pate in:
place and represe participate in thos We understand the the participant, We of any such injurepresentatives he while engaged in the participant, a	ent to you that the page activities. That the activity does page of the activity does page of the activity does page of the activity which is activity which is	present the risk of hat we and the pa hold you, your a bility for injury or caused or contributing and defend your	e activities that may take ally and mentally able to injury, or even death, to articipant assume the risk agents, employees, and death to the participant uted to by the conduct of the participant to participant.
and representative as a result of the and indemnify yo	es harmless from all conduct of the part	liability to any othe icipant in this activ ployees, and repr	your agents, employees, er person or entity arising vity and agree to defend resentatives against any
participate, so as our behalf to arra	to be consulted in th	e case of necessit I and hospital trea	hich the participant is to ty, you are authorized on tment as you may deem
Parents/Guardia	ns Signature:		
			Date

THIS FORM MUST BE SIGNED AND RETURNED, ONLY THOSE RETURNING THIS FORM PROPERLY SIGNED CAN BE GRANTED PERMISSION TO PARTICIPATE.