

Clear Lake Bible Church
622 El Dorado Blvd.
Houston, TX 77062
281-488-0037

Liability and Medical Release Forms

Child's Name: _____ Date of Birth: _____

Address: _____ City/State/Zip: _____

Parent/Legal Guardian Name: (Please print) _____

Home phone: _____ Work phone: _____

Other numbers where you can be reached: _____

If neither parent nor guardian can be located, in case of emergency call:

Name: _____ Phone: _____

In consideration of the opportunity for my child to participate in all activities at Clear Lake Bible Church, and fully recognizing that such an undertaking may involve an element of risk, I/we assume all risks and hazards incidental to such participation, and do hereby release, absolve, indemnify, and agree to hold harmless Clear Lake Bible Church of Houston, TX, its employees and officers, chaperones, leaders, organizers, sponsors, and persons transporting our child to and from these activities. Neither Clear Lake Bible Church, nor any of said persons above shall be held financially responsible for any injury, illness, or death incurred as a direct or indirect result of these activities.

I hereby give my permission of officials or the representatives of Clear Lake Bible Church to call an authorized doctor or emergency medical service, and to administer emergency medical aid for my child should an emergency arise. It is understood that these officials/representatives will make a conscientious effort to locate emergency contacts listed above before any action will be taken. If it is not possible to locate the parent, guardian, and/or emergency contacts listed above, then I/we will accept the expense of emergency medical and/or surgical treatment. This includes all treatment such as administration of medication, administration of anesthesia, hypodermic injection, minor surgery, and the like.

This release is intended to be used during the entire year, January _____ through December _____. This includes both meetings on-site and outings off-site. I have read this release, understand all its terms, and execute it voluntarily and with full knowledge of its significance.

Parent/guardian signature: _____ Date: _____