MT ZION LUTHERAN CHURCH LIABILITY RELEASE FORM

In consideration for being accepted by **Mt. Zion Lutheran Church for participation in youth activities held during the 2017-18 school year and following summer**, we (I), on behalf of my child do hereby release, forever discharge and agree to hold harmless **Mt. Zion Lutheran Church** and the directors thereof from any and all liability, claims or demands for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the child that occur while said child is participating in any trip or activity this year

Furthermore, we(I) on behalf of our (my) child hereby assume all risk of personal injury, sickness, death, damage and expense as a result of participation in recreation and work activities involved therein.

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

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

We(I) are the parent(s) or legal guardian(s) of this participant, and hereby grant our(my) permission for him(her) to participate fully in said trips or activities, 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.

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.

We (I) hereby give permission for photographs/video including my child and/or myself to be used in the promotion of Mt. Zion and/or the ELCA

CHILD'S NAME	DOB
PARENT/GUARDIAN SIGNATURE	DATE

Mt. Zion Sunday School Medical/Emergency Form 2017-2018

Name of Student First: Last: DOB: _____ Gr. ____ (School Year 2017-18) Address: _____ **Emergency Contact** Parent/Guardian #1 First: _____ Last: _____ Phone #1_____ Phone #2_____ Parent/Guardian #2 First: _____ Last: _____ Phone #1_____ Phone #2____ **MEDICAL INFORMATION** Is the child taking any Medications? Yes No If yes please list and why: Has the child had any of the following? If so please explain: Special Needs: ______Allergies or Asthma: _____ Dietary Restrictions: Chronic or Recurring Illness: Status of child's vision, hearing, and speech: Additional information about your child's behavior that might be helpful to our volunteers:

Parent Signature_____

Date

Sunday School Dates to Remember 2017-2018

9/10/17	Rally Sunday, 1 st day of Sunday school, Fall Festival, Sunday School Sings 10:30a
10/22/17	Sunday school sings in church during 10:30 am Service
11/26/17	No Sunday school
12/17/17	Sunday School Christmas Program during 10:30 am Service
12/24/17	No Sunday school
12/31/17	No Sunday school
2/25/18	Sunday school sings in church during 10:30 am Service
3/4/18	No Sunday school
3/11/18	No Sunday school
4/1/18	No Sunday school
4/29/18	Sunday school sings in church during 10:30 am Service
5/6/18	Last Day of Sunday school