

**ACTIVITY CONSENT FORM**

Participant's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Activity: \_\_\_\_\_ Date: \_\_\_\_\_

I/we do hereby release the church, their agents, staff, and volunteer assistants from any liability whatsoever arising out of any injury, damage, or loss which may be sustained by said person during the course of involvement with the activity described below.

Participant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(If the participant is under 18 years of age, signature of parent or legal guardian is required.)

Parent//Legal Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

---

(Retain this portion for your information)

Activity \_\_\_\_\_

Description \_\_\_\_\_

Location: \_\_\_\_\_ Cost: \$ \_\_\_\_\_

Departure date and time: \_\_\_\_\_ Arrival date and time: \_\_\_\_\_

Where to drop-off: \_\_\_\_\_ Where to pick-up: \_\_\_\_\_

Items to bring \_\_\_\_\_

Items not to bring \_\_\_\_\_

Special Instructions \_\_\_\_\_

Church Contact Person \_\_\_\_\_

Contact Phone # \_\_\_\_\_