

Puna Seventh-day Adventist Church
Friends Club 2015-2016 School Year

Permission/Medical Release/Media Consent Form

My child _____, has my permission to participate in Friends Club.

Statement of Release

As parents or legal guardians of the above registered child, permission is granted for emergency medical treatment or surgery if necessary. Also, as parents or legal guardians, we have provided our child with medical insurance. We, therefore, release the Puna Seventh-day Adventist Church and Hawaii Conference of Seventh-day Adventists, the Pacific Union Conference, the North American Division, and the General Conference of Seventh-day Adventists of any and all liability in the case of injury or death.

Medical Treatment

Furthermore, in the event of an accident, if said staff or representatives are unable to contact the undersigned, I hereby grant permission to said staff or representative to administer first aid, and/or take the participant to a medical facility for treatment.

Signature of Parent or Legal Guardian

Date

Media Consent

I hereby consent and authorize the Friends Club of the Puna Seventh-day Adventist Church to use my name and/or the names of my family members who are minors, as listed above, as well as my likeness, photos, videos, and other information (or that of family members who are minors) for the purpose of news releases, advertising publicity, publication or distribution in all forms and media. I further consent to such use in their present form and to any changes, alterations, or additions thereto. I hereby release the Friends Club of the Puna Seventh-day Adventist Church from all liability in connection with all such uses.

Signature of Parent or Legal Guardian

Date

Puna Seventh-day Adventist Church
Friends Club 2015-2016 School Year

Registration:

Name of child _____ Age _____ DOB _____

Mailing Address _____

Parent/Guardian names

1) _____ cell _____

2) _____ cell _____

Home phone _____ Work phone _____

I/We give our permission for _____ to participate in
Friends Club at the Puna Seventh-day Adventist Church.

Signature of Parent or Legal Guardian

Date

T-Shirt size youth S M L