

CONSENT FORM

I(we), the undersigned parents or legal guardian(s) of (Student's name here), a minor, do hereby release Hope of Glory Presbyterian Church, leaders, staffs, members and volunteers from any liability whatsoever arising out of any injury, illness, damage of loss which may be sustained by said person during the course of involvements with the VBS of Hope of Glory.

I(we), the parent(s) or legal guardian hereby authorize Hope of Glory Presbyterian Church personnel, as agent(s) for the parent(s) or legal guardian to the administration of treatment, such as any x-ray, examination, anesthetic, medical or surgical diagnosis, treatment or hospital care which is deemed necessary on in the opinion of the attending licensed physician. It is understood that an effort shall be made to contact the parent(s) or legal guardian prior to the rendering of treatment but such treatment will not be withheld if the parent(s) or legal guardian cannot be reached. I(we) will not hold Hope of Glory Presbyterian Church, its volunteers or staff liable for medical aid rendered or consent given for diagnosis/treatment of my child which is advisable.

I(we) acknowledge and agree to use of cameras, including the possible recording of my images and my child(children)'s in the church events and programs. I(we) do hereby authorize Hope of Glory Presbyterian Church personal publish the photographs/videos taken of my minor child, for use in Hope of Glory Presbyterian Church's printed publications and website. I release Hope of Glory Presbyterian Church from any expectation of confidentiality for my minor child and attest that I am the parent or legal guardian of the children listed below and that I have the authority to authorize Hope of Glory Church to use their photographs/videos. I acknowledge that since participation in publications and websites produced by Hope of Glory Church is voluntary, neither the minor children nor I will receive financial compensation. I further agree that participation in any publication and website produced by Hope of Glory Church confers no rights of ownership whatsoever. I release Hope of Glory Church, its officers, and its employees from liability for any claims by me or any third party in connection with the participation of the undersigned minor child.

I(we) have carefully read this release and hold harmless agreement and fully understand its contents. I am aware that it is a full release of all liability.

Parent's Signature

Parent's Name

Date

**After completing this form, please email this to 'hopeofglorycm@gmail.com'.*