

I.

## Vacation Bible School PARENTAL CONSENT FORM & INDEMNITY AGREEMENT (must be completed for all participants & volunteers under 18)

Student/Participant Name \_\_\_\_\_

Vacation Bible School at St. Mark's Episcopal Church June 10 - 13, 2019 at 9:30am – 12:30pm VBS Performance: June 16, 10:30am (family invited)

Activities at VBS include:

- Music and dancing
- Games, running, and other physical activity
- Arts and Crafts
- Dramatic expression/play-acting
- Snack (Parents are responsible for providing alternate snacks in case of food allergies/ snack volunteers may be using knives)
- Indoor and outdoor activities
- Volunteers may be setting up or taking down decorations or equipment
- Faith-based instruction, and discussions

\_\_\_\_\_, grant permission for \_\_\_\_\_\_

Child Name

to participate in the above named activity and I warrant that my child is in good health. In consideration of my child's participation, I agree to indemnify St. Mark's Episcopal Church and the Diocese of Texas from any claims or law suits brought against the parish/Diocese of Texas by myself, my child or others, that arises out of any behavior by my child at the event/activity described above. I also agree to pay reasonable attorney's fees or expenses incurred by the parish and the Diocese in defense of such a claim/suit.

**EMERGENCY MEDICAL TREATMENT:** In the event of an emergency, I give permission to transport my child to a hospital for medical treatment. I wish to be advised prior to any further treatment by a doctor or hospital. In the event of an emergency, if you are unable to reach me, I give permission for the previously provided alternate emergency contact to give consent for treatment.

## **OPTIONAL MEDICAL INFORMATION:**

Medication my child is taking at present	
Allergies	
Other Medical Conditions	
Family Health Plan carrier number	
Family Doctor	Phone Number
As Parent or Guardian, I agree to all of the above stated considerations and conditions.	