

**Off Site Consent Form
(Form # 9)**

Student Name(s) _____

Activity: _____ Date of Activity: _____

Details of the Activity: (include location/time/sleeping arrangements/mode of transportation/driver/ activities upon arrival/ratios of student to staff/explanation of any and all risk which the students will be participating in i.e. rock climbing/bungee jumping/white water canoeing/water skiing)

Dear Parent:

We are planning an activity as part of our programming that requires your permission prior to participation. We have provided you the details of the activity and request that you complete and sign the permission form. The safety of your child is our primary concern. Precautions will be taken for their wellbeing and protection.

Permission Form and Consent:

Student's Name _____ Date of Birth _____

Address _____

Phone Number _____ Parent's Work Number _____

Insurance Provider and Policy Number _____

Family Physician _____ Phone Number _____

In case of emergency, contact _____

I hereby consent to the participation of my/our child(ren) in this supervised activity.

While every precaution is taken for the safety and good health, some sports and activities carry with them the inherent risk of personal injury beyond the risks associated with many of the recreational activities at the church. I/we understand and accept these risks and agree that by allowing my child to participate in those activities, he/she may be taking part in a recreational activity that presents the potential for personal injury.

I/we, the parents or guardians named below, authorize the Director or one of Maranatha Bible Chapel's Personnel to sign a consent for medical treatment and to authorize any physician or hospital to provide medical assessment, treatment or procedures for the participant named above.

I/we, named below, undertake and agree to indemnify and hold blameless Maranatha Bible Chapel, its personnel, its Directors, and board from and against any loss, damage or injury suffered by the participant as a result of being part of the activities of Maranatha Bible Chapel, as well as any medical treatment authorized by the supervising individuals representing Maranatha Bible Chapel. This consent and authorization is effective only when participating in or traveling to events of the church.

I have read, understood and agree with the above. Activity: _____

Parent/Guardian Signature _____

Printed Name _____ Date _____