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Release of Claims Form

NAME OF PARENT/GUARDIAN:	
ADDRESS:	
CHILD(ren) NAME(s):	

Please circle all activities that children under 18 under your care are involved in:

One Step	Sunday School	LOGOS	Youth on Fire
Garden Club	Mission Trips	Choir	Nursery

Other

I hereby affirm that my child shall be participating in the above named activity and certify that I am cognizant of the inherent dangers associated with participation in the activity and with the fact that participating in the activity may take place outside of, or off of, church premises.

I understand and agree that neither Peace Lutheran Church, not its trustees, representatives, instructors or agents may be held liable in any way for any occurrence in connection with my child's participating in the activity which may result in injury.

As a part of the consideration for being allowed to enroll and participate in the activity, I hereby personally assume all risks in connection with my child's participation in the activity.

I also authorize Peace Lutheran Church to render or obtain such emergency medical care or treatment as may be necessary should any injury, harm or accident occur to my child while participating in the activity.

I further state that I am of lawful age and legally competent to sign this affirmation and release; that I understand the terms herein are contractual; and that I signed this document of my own free will. I further state and acknowledge that I have fully informed myself of the contents of this release of claims form by reading it before I have signed it.

I have executed this affirmation and release on the ____ day of _____ 20____.

Signature _____

Printed Name:_____