LIABILITY RELEASE

We, the undersigned parent(s) or legal	•		,
forever discharge and agree to hold have representatives thereof from any and a sickness, or death, as well as property be incurred by my child in the course George at any time.	all liability, claim damage and exp	is, or demands for personal injuense of any nature whatsoever	ıry, which may
Furthermore, we agree to assume all roccurrences.	esponsibility for	any of the previously mentione	ed
We give authorization for the church t (if applicable).	to provide all nec	essary food, transportation, and	d lodging
We give our permission for our child representatives of the church to obtain for any medical bills incurred.		_	•
Should our child have to return home hereby assume any costs incurred.	before the group	for medical or disciplinary rea	sons, we
Print Child's Name		Emergency Contact/Num	ber
Insurance Co/Number		Physician's Name/Number	
Father's Signature	Date	Mother's Signature	Date
Legal Guardian Signature	Date	Non-Custodial Parent/Nu	mber

*Both parents must sign, unless only one parent has legal custody. In such case, indicate non-custodial parent's name and whether to contact in case of emergency.