

Youth Group Permission/Waiver Form 2021-2022

l,	, hereby give pe	
(Parent/guardian)		(Name of youth)
to participate and engage	in the 2021-2022 youth	activities at St. David's Church.
Episcopal Church, and for and discharge St. David's leaders acting officially of action on account of any authorize any volunteers, emergency medical treats understand that an attemp	or allowing my child to pass Episcopal Church, and or otherwise from any ard injury sustained by my amployees and adult lement for my child at any pt will be made to notify	the above named activity by St. David's participate in this activity, I do hereby release I all of its volunteers, employees and adult and all claims, demands, actions, or causes of child during said above named activity. I hereby adders of St. David's Episcopal Church to obtain a time during the above named activities. I the parents first. If the parents are not available by room at the nearest hospital as circumstances
Please list any special member listed:	edical/health information	n (including medication) concerning youth
I, the undersigned, hereby and have signed the same		ve read the foregoing, understand its contents, I deed.
(Signature of parent/guardian)		(Date)
(Home phone)	(Cell phone)	
	Permission	for Publicity
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recording of children and	d/or adults in church/you ild named above or me,	s photographs of makes an audio or videotape ath activities. I consent to the use of such audio if I am participating, to be used, distributed or
I give permission for pub	olicity:	
I do not give permission	for publicity:	