Children's Ministry *Elementary Self Release Dismissal Request*

I, the parent or legal guardia (Parent's Name) request that my child be dismissed on his or her own at	(Child's Name)
I understand that my child will be unsupervised upon hi	s or her release. I do therefore hereby release
forever discharge and agree to hold harmless Kerrville F	irst United Methodist Church and the
representative thereof from any and all liability, claims,	or demands for personal injury, sickness, or
death which may incur as a result of their release.	
Our designated meeting place is	
Print Child's Name	Class
Print Parent's Name	_
Parent's Signature	_
Date	