

To Whom It May Concern:

We the undersigned are the parents, the custodial parent of, legal guardian of _____, a minor and have given our consent for him/her to participate in Wesley United Methodist Church of Shawnee Youth sponsored activities **from January 1, 2018 to December 31, 2018.**

In the event that he/she is injured while participating in this activity and requires the attention of a doctor, we consent to any reasonable medical treatment as deemed necessary by a licensed physician. In the event treatment is called for which a physician and/or hospital personnel refuse to administer without our consent, we hereby authorize any adult sponsor representing Wesley United Methodist Church of Shawnee Youth to give such consent for us if we cannot be reached by telephone at one of the numbers indicated on the reverse, or because of an emergency there is no time for us to give consent. We agree to hold such person free and harmless of any claims, demands or suits for damages arising from the giving of such consent as long as the treatment is administered by or under the supervision of a licensed physician.

We agree to pay for any medical treatment, which is not covered by insurance. For youth participants over the age of 18, signing below indicates permission for medical treatment if undersigned is unable to give permission due to medical condition. All statements above, which would pertain to permission for treatment, will apply to adult undersigned.

Wesley United Methodist Church assumes no financial responsibility or liability for medical conditions preexisting or incurred while participating in Youth sponsored activity.

The undersigned does also hereby give permission for our child to ride in any vehicle designated by the adult whose care the minor has been entrusted while attending and participating in activities sponsored by Wesley United Methodist Church Youth.

The undersigned does also hereby give permission for our child to be photographed and recognizes that photographs may be used on the Wesley United Methodist Church social media pages and/or print materials for marketing and promotion purposes.

Signature of Parent, Custodial or Legal Guardian

Signature of Parent, Custodial or Legal Guardian

Name (please print)

Name (please print)

Relationship to Youth

Relationship to Youth