



**Medical Consent:** I hereby consent that I am authorized to execute medical consent on behalf of the above-named child. I hereby give my consent for said child to participate in the Children's, Youth, and/or Music Ministry programs, Mission, and/or as a volunteer at Cornerstone Presbyterian Church (hereinafter, the "Church") and planned off-site activities. In the event of an emergency I give my permission to an X-ray examination, anesthetic, medical or surgical diagnosis and treatment and hospital care, and the administration of drugs or medicine to be rendered to my child under the general or specialized supervision of, and upon the advice of, a duly licensed physician and/or surgeon. In the event of an emergency, reasonable efforts will be made by the Church to contact the responsible adult listed on the reverse of this form as quickly as is feasible under the circumstances.

**Photo Release:** I give permission for my child to be photographed, videotaped and/or audio taped during sponsored Church activities. I understand that these pictures and/or sounds may be shared with the children, church membership, and/or visitors including use on our website. No names will be listed with pictures.

\_\_\_\_\_ Check here if **NOT** giving permission.

**Participation Consent and Release:** I (and, if applicable, the child's other custodial parent) hereby consent that the child named on this form may participate and/or volunteer in (check activities):

\_\_\_\_\_ Church/Nursery/Children's/Youth/Music activities      \_\_\_\_\_ Outreach and Mission Trips

I/we understand that participation in these activities involves a certain degree of risk. I have carefully considered the risk involved and have given consent for my child to participate in these activities. Furthermore, I/we understand that being the hands and feet of Jesus through *outreach activities and mission trips* also involves a degree of risk, and that these activities may include ministering to people of all backgrounds and histories, and in unfamiliar locations. I understand that participation in these activities is entirely voluntary and requires participants to abide by applicable rules and standards of conduct. I release Cornerstone Presbyterian Church, directors, employees, volunteers, and related parties from any and all liability, claims, or demands for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and my child that occur while my child is participating in these activities during the period of **August 1, 2020 - August 31, 2021.**

In confirmation of the above, I sign this Consent and Release this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
(Parent's Name printed)

\_\_\_\_\_  
(Parent's Signature)

**MUST BE SIGNED BEFORE A NOTARY PUBLIC.**

State of \_\_\_\_\_ )  
S.S.

County of \_\_\_\_\_ )

On this date, \_\_\_\_\_, before me, \_\_\_\_\_  
(insert name and title notary public)

\_\_\_\_\_ personally appeared before me

whom I know personally,  whose identity was proved to me on the basis of satisfactory evidence, and who acknowledged the execution of the foregoing form and stated that the information therein set out is true and correct to the best of his/her knowledge and belief.

My commission expires:

\_\_\_\_\_  
Notary Public Signature

Seal: