



RELEASE FORM for GROVE EVENT

I _____ (parent /legal guardian) give permission for my child,
_____, to ride in the personal vehicle of Pastors Theo and
Gayleen Myer or Volunteer Jordan Myer from Corralitos Community Church to
_____ on _____.
(place of event) (date of event)

In case of emergency, I hereby give my permission to any licensed physician and hospital selected by the group leader, staff member, or volunteer helper to hospitalize, secure treatment for, and to order injection, anesthesia, or surgery for the above named. I understand that neither church nor any individual will be held responsible in the event or accident, injury, or disobedience. Additionally, I realize that no funds will be refunded to students who are withheld from an activity due to disobedience.

Corralitos Community Church does not carry accident insurance for group activities. Should an accident or injury occur, you will be expected to cover ALL the medical expenses involved. Thank you.

Emergency Contact Cell Phone: _____

Signature: _____ Date: _____