

CHORISTERS GUILD PERMISSION FORM

Because of my desire to have _____ participate in the children's choir festival in Orlando, Florida, on March 9, 2019, I hereby agree to release, absolve, and hold harmless the Central Florida Chapter of Choristers Guild, First United Methodist Church, Orlando, Florida, and any and all chaperones and supervisors, organizers or sponsors from any and all liability for injury, medical fees, hospital bills, or doctor bills of my aforesaid. I waive all claims of any kind against all of the persons transporting my child to or from the festival.

In case of emergency I understand that every effort will be made to contact me. If I can't be reached, I give Choristers Guild organizers permission to act in my behalf in seeking emergency treatment for my child in the event the adults with my child deem that such treatment is necessary. I give permission to those administering emergency treatment to do so using those measures deemed necessary.

I also give the Central Florida Chapter of Choristers Guild permission to publish and use pictures of my child in which he/she may be included in whole or in part.

Parent / Guardian

Signature(s) _____

Home Address _____

Allergies or Medications: _____

Home Phone No. _____ Work Phone No. _____

Cell Phone Number _____

In case of emergency call: _____

Home Phone No. _____ Work or Cell No. _____

Insurance Company Name _____

Policy Number _____ Group Number _____

Employer _____

Name of Insured _____