

Last Name:	
First Name:	_
Activity:	
Date(s) of Activity:	

Waiver of Liability Statement

I, the parent or legal guardian of the child listed above, release Crossroads Baptist Church, together with the adults in charge, from any and all claims resulting from injury or damage that may be sustained by my child while participating in or traveling during the activity above.

I consent to the use of any video images, photographs, audio recordings, or any other visual or audio reproduction that may be taken of the subject of this release to be used, distributed, or shown as Crossroads Baptist Church sees fit, including but not limited to publications or church website.

I understand all reasonable safety precautions will be taken at all times by Crossroads Baptist Church and its agents. I understand the possibility of unforeseen hazards and know the inherent possibility of risk. I agree not to hold Crossroads Baptist Church, its leaders, employees, and volunteer staff liable for damages, losses, disease, or injuries incurred by the subject of this release form.

I understand that Crossroads Baptist Church is not currently equipped to care for *special needs children*. The above named activity can be fast paced, with a high volume of movement, and children must be able to follow verbal instructions quickly, use appropriate behavior towards fellow students, and be responsible for their own restroom needs.

Parent/Guardian Printed Name	Parent/Guardian Signature	Date	