

# Good Samaritan Church

## Permissions/Consent Form

I, (parent/guardian name) \_\_\_\_\_, parent/legal guardian of (child's name) \_\_\_\_\_, hereby give my child permission to participate in all church-sponsored children's activities taking place during the 2018-2019 school year.

I release Good Samaritan Church, its staff and volunteers, from responsibility and liability for an injury or illness my child may sustain during church-sponsored activities. I understand that I will be notified in the case of a medical emergency. However, in the event that I cannot be reached, I authorize the calling of a doctor and the providing of necessary medical services in the event that my child is injured or becomes ill. If it is required by law or a health care provider, I authorize the Nursery Care Provider to make emergency medical care decisions on behalf of my child, or another adult volunteer approved by the Good Samaritan Church. I authorize these persons to act in my place to consent to all necessary and appropriate x-ray examinations, anesthetic, medical or surgical diagnosis or treatment, and hospital care.

(Optional) I give permission for my child to have his/her picture taken for part of the program and possible display in church publications, the church website/facebook pages, inside the church building without his/her name (unless I give special permission for their name to be used).

I accept

(Optional) (If child is an infant or toddler) I give permission for my child to have his/her diaper changed by staff and/or volunteers in the nursery.

I accept

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date