



**Participation Agreement Form
Must Be Notarized**

First Baptist Church of Pelham (205) 663-7492
2867 Pelham Parkway Pelham, AL 35124

Name _____ Grade _____ Age _____

Home address _____ City _____ State _____ Zip _____

Date of Birth _____ Place of Birth _____

Phone Numbers _____
Mom Cell Dad Cell

Parent or Guardian Names _____

Doctor's Name and Phone Number _____

Please attach a copy of your insurance card

Insurance Company _____ Policy # _____ Group # _____

My Child **does not** have health Insurance.
Initial

In the event of an emergency: Please give the name and phone number of friends or relatives we can contact who will know how to reach parents/guardians:

Name _____ Relationship _____ Phone _____
Name _____ Relationship _____ Phone _____

SWIMMING: My student is: non-swimmer fair swimmer good swimmer

IMMUNIZATION: Tetanus **Date:** _____

List known food/drug or other allergies _____

List medications taken regularly _____

Previous operations, surgeries, or serious illnesses (list year) _____

Any other special instructions regarding student:

Continue on reverse side

Office Use Only

Insurance Card on File

Expiration Date

******PHOTO RELEASE WAIVER ******

To the parents/guardian of _____, please note that by signing this Participation agreement, you understand that photos may be taken of activities or events sponsored by First Baptist Church of Pelham, and may be presented in various church-sponsored media. These include but are not limited to: photos, videos, slide presentations, social media, PowerPoint presentations, newsletters, bulletins and/or bulletin inserts, brochures, handbooks, programs, and church internet Web pages. I hereby remise, release and forever discharge First Baptist Church of Pelham from any liability for any injury or action against the above named minor resulting from the use of such photos, video, or other images in any medium utilized. This release includes that First Baptist Church of Pelham will not be responsible for other users' production, display, distribution, or modification of the minor's images in any manner, nor will First Baptist Church of Pelham be responsible for defamation, misrepresentation, or criminal acts as a result of unauthorized use of First Baptist Church of Pelham images by third parties. Images of a minor child published on First Baptist Church of Pelham's internet website will not be identified by name.

Parent/Guardian signature: _____ Date: _____

******PARENT/GUARDIAN PERMISSION******

THIS MEDICAL RELEASE VAID FROM JANUARY 1 THROUGH DECEMBER 31 OF CURRENT YEAR

I hereby give my permission for _____ to take part in various sponsored trips, outings, camps and events of First Baptist Church of Pelham, Alabama. I further give my permission for the designated/approved church representative or sponsor to secure any needed medical treatment of the above named son/daughter. I release the church representative or sponsors from liability for accident or injuries on these trips or activities.

I further understand and agree that, in the event that the above named son/daughter be involved in any non-Christian or dangerous activities, I will pay his/her expenses to be sent home immediately at the discretion of the approved sponsors and/or church representatives.

I have supplied, understand, and agree to all the information contained on this Participation Agreement Form.

Parent/Guardian signature: _____ Date: _____

Signed before me this _____ day of _____ 20__

Notary _____ My commission expires: _____