



Sunday Night Family Information Form

Parents' Names:

Mom's Cell: _____ Dad's Cell: _____

Child 1:
Name: _____
Grade: _____ Allergies or Needs? _____

Child 2:
Name: _____
Grade: _____ Allergies or Needs? _____

Child 3:
Name: _____
Grade: _____ Allergies or Needs? _____

Child 4:
Name: _____
Grade: _____ Allergies or Needs? _____

Please see back to sign and date

PHOTO RELEASE WAIVER

To the parents/guardian of _____, please note that by signing this form, 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.

MEDICAL RELEASE WAIVER

To the parents/guardian of _____, please note that by signing this form, you give your 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.

Parent/Guardian signature: _____

Date: _____