

HOLY COVENANT UNITED METHODIST CHURCH OF KATY, INC.

PERMISSION TO PARTICIPATE:

I hereby grant permission for full participation in any and all activities of Holy Covenant United Methodist Church, subject to the limitations noted on the reverse side of this form.

I hereby grant permission for my child to leave the church premises under supervision of an adult chaperone for church sponsored activities/trips.

I hereby grant permission for myself or my child to be included in evaluations and pictures connected with the activities of Holy Covenant United Methodist Church of Katy, Inc.

I hereby grant permission for the adult leader or chaperone to take whatever steps may be necessary to obtain emergency medical care if warranted. These steps may include, but are not limited to, the following:

1. Attempt to contact parent/guardian, spouse, or emergency contact;
2. Attempt to contact the physician;
3. If the adult leader is unable to contact the parent/guardian, spouse, emergency contact, or physician, to either (a) call another physician or paramedics, (b) call an ambulance, (c) have the participant taken to an emergency hospital, in the case of a minor the child will be accompanied by an adult leader.

I covenant to indemnify Holy Covenant United Methodist Church of Katy, Inc. for all costs and expenses incurred by virtue of such emergency medical treatment. I further grant authorization to the adult leader and/or chaperone to take such action as may be necessary, including any disciplinary action which, in the judgment of the adult leader and/or chaperone is necessary to provide for the safety and well-being of myself, my child and of the other participants in the activity/trip. I covenant and agree that for in consideration of participation in the activity/trip, I release Holy Covenant United Methodist Church of Katy, Inc. and the adult leaders and chaperones from any injuries, claims and damages of every kind, to the person or damage to the property of the individual, to the extent that such release is valid under Texas law.

Signature: _____

Date: _____

Parent/Guardian Signature: _____

Date: _____

STATE OF TEXAS }
 }
COUNTY OF HARRIS }

Before me, the undersigned, a Notary Public in and for said County and State, on this day personally appeared _____, known to me to be the person(s) whose name is subscribed to the foregoing instrument, and acknowledged to me that he executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this _____ day of _____, _____

Notary Public in and for the State of Texas

My Commission expires: _____