

DISCIPLE NOW '09 Registration

Name _____ Age _____ Grade _____

Address _____

City/State/Zip _____ School _____
(Adult Sizes)

Phone # _____ Shirt Size: S ___ M ___ L ___ XL ___ XXL ___

If possible, I would like to be in a home with:

1. _____
2. _____
3. _____

I attend church at: _____

COST: \$45 if paid ON OR BEFORE 2/1/09 \$60 if paid AFTER 2/1/09

Liability Release Form

In consideration for being accepted by **First Baptist Church Lake Jackson, Texas** for participation in **Disciple Now Weekend 2009**, we (I) being 18 years of age or older, do for ourselves (myself)(and for and on behalf of my child-participant if said child is not 18 years of age or older) do hereby release, forever discharge and agree to hold harmless **First Baptist Church 401 Yaupon St. Lake Jackson, Texas 77566** and the employees, leaders, directors and volunteer staff thereof from any and all liability, claims or demands for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the child-participant that occur while said child is participating in the above-described trip or activity.

Furthermore, we (I)[and on behalf of our (my) child-participant if under the age of 18 years] hereby assume all risk of personal injury, sickness, death, damage and expense as a result of participation in recreation and work activities involved therein. Further, authorization and permission is hereby given to said church or individual to furnish any necessary transportation, food and lodging for this participant. The undersigned further hereby agree to hold harmless and indemnify said church and said individuals, its directors, employees and agents, for

Permission to be Excused From Portion(s) of Event

My child will need to be excused during the weekend at the following times:

From: _____ To: _____

Reason: _____

My child DOES ___ or DOES NOT ___ have my permission to drive his/her car **ONLY** during those periods away from scheduled activities. **STUDENTS WITHOUT SPECIFIC TIMES TO BE EXCUSED WILL NOT BE ALLOWED TO DRIVE DURING EVENT.**

It is understood that if the rules of this activity are not obeyed, I may be asked to escort him/her home for the remainder of the weekend without refund of the registration fee.

Parent/Guardian Signature _____

any liability sustained by said church as the result of the negligent, willful or intentional acts of said participant, including expenses incurred attendant thereto.

(If the participant has not attained the age of 18 years):

We (I) are the parent(s) or legal guardian(s) of this participant, and hereby grant our (my) permission for him (her) to participate fully in said trip, and hereby give our (my) permission to take said participant to a doctor or hospital and hereby authorize medical treatment, including but not in limitation to emergency surgery or medical treatment, and assume the responsibility of all medical bills, if any. Further, should it be necessary for the participant to return home due to medical reasons, disciplinary action or otherwise, we (I) hereby assume all transportation costs.

Student Name: _____

Emergency Phone Number: _____

Allergies or Health Conditions: _____

Health Insurance Policy No.: _____

Signature of Parent/Guardian: _____