

**Meadows Baptist Church
Sports Camp
Medical and Liability Release Form**

For Office Use Only
Paid: Cash/Check # _____
Form Signed _____
Entered on roster _____

Copy and complete this form for each child.

Medical and Liability Release

We realize that no activity is without the possibility of unforeseen hazards which could result in injury to an individual. As a parent or guardian, you are to be aware of your responsibility to instruct your child of the importance of conduct which will insure safety and enjoyable time while participating in this activity. By signing this form, you, as a parent, guardian or other responsible party, agree to assume the risks and hazards which are inherent in this kind of activity. You also agree to absolve and hold harmless the sponsoring organizations and their representatives for damage, loss or injuries to the child for whom you sign.

I give my child, _____ to participate in this activity.

Parent's/Guardian Print name and signature:

Date _____