

2023 Harvest Youth Registration

I give my son/daughter permission to take part in the activities that are being sponsored by Harvest Fellowship Church. In the event that he or she is injured while participating, I do hereby authorize and consent to any X-ray, examination, anesthetic, medical, or surgical diagnosis rendered under general or special supervision of any licensed medical staff member. It is understood that this authorization is given in advance of any specific diagnosis or treatment being required, but is given to provide authority and power to render care which the aforementioned physician, in his or her best judgment, may deem advisable. It is understood that effort shall be made to contact me, the undersigned, prior to rendering treatment to my child, but that any of the above treatment will not be withheld if I cannot be reached. I understand the nature of these events and do hereby release Harvest Fellowship Church, its staff and representatives, from any liability for accidents or injury sustained by my child in conjunction with this event. I authorize Harvest Fellowship staff and leaders to inspect my student's belongings if deemed necessary to ensure that they have not brought any prohibited or illegal items. I understand that if my child misbehaves or violates rules, I may be called to pick him/ her up at my own expense with no refund of convention payment. I authorize Harvest Fellowship to use my child's likeness in photographs/ videos in any and all of its publications and media. I will make no monetary or other claims against Harvest Fellowship for the use of such photos/videos.

COVID 19

Due to the fact that people can be carriers without even knowing, we cannot guarantee your child will not become exposed to, contract or spread COVID 19 while utilizing Harvest Fellowship Church's services or premises. Therefore, if you choose to allow your child to attend any activities at Harvest Fellowship Church, your child could be exposed to COVID 19.

WAIVER OF LAWSUIT/LIABILITY

I hereby forever release and waive my right to bring suit against Harvest Fellowship Church, or its elders, staff, volunteers other representatives in connection with exposure, infection, an/or spread of COVID 19 or any other injury or illness related to attending any youth activities. I understand that this waiver means I give up my right to bring any claims including personal injuries, death, disease or property losses, or any other loss, including but not limited to claims of negligence and give up any claim I may have to seek damages, whether known or known, foreseen or unforeseen.

RULES AND MEDIA

I authorize Harvest Fellowship staff and leaders to inspect my student's belongings if deemed necessary to ensure that they have not brought any prohibited or illegal items. I understand that if my child misbehaves or violates rules, I may be called to pick him/ her up at my own expense, I authorize Harvest Fellowship to use my child's likeness in photographs/videos in any and all of its publications and media. I will make no monetary or other claims against Harvest Fellowship for the use of such videos/photos.

Students Full Name: _____ Age: ____ Grade: ____ Sex: M or F
Date of Birth: ____ / ____ / ____
Address: _____
City, State, Zip: _____
Student Phone (if applicable): _____

In case of emergency notify:

#1 Full Name: _____
Phone: _____
Relation to Student: _____

#2 Full Name: _____
Phone: _____
Relation to Student: _____

Are there any special problems of which we should be aware (allergies, etc.)
Explain: _____

List medications that your student is taking on a regular basis and amounts: _____

Family Doctor: _____
Insurance Company: _____
Insurance Policy #: _____

I give my permission for my son/daughter to ride with Harvest Fellowship Church. I also give consent for any emergency treatment deemed necessary by leadership. I understand that I cannot hold the church responsible for the safety of my child should he/she disregard the rules and guidance of the leadership; neither is the church responsible for my child before or after the ride.

Parent/Guardian Signature: _____
Date: _____

(Must be signed for student to walk home after Youth Group) My student has my permission to walk home once Youth Group concludes at 8pm on Wednesday nights;
Signature: _____
Date: _____