2022-2023 PARTICIPATION FORM

FAIRVIEW BAPTIST CHURCH



PARTICIPAN1	Γ INFORM <i>!</i>	ADION				STUDENTS
First Name				Last Name		
Birthdate		Grade	School	2436 7 441110		
Address		Grade	3611001			
City				State	Zia	o Code
	/ \					Code
Cell Phone	()			Home Phor	ne ()	
E-Mail Addre	ess					
MOTHER/GU	ARDIAN IN	IFORMATIO	N (IF UNDER 18	8 YEARS OL	D)	
Name			•		<u> </u>	_
Cell Phone	()		E-Mail Addre	255		
	· /		L Man / taar			
FATHER/GUA	ARDIAN INI	FORMATION	(IF UNDER 18	YEARS OLD))	
Name						
Cell Phone	()	-	E-Mail Addre	ess		
	, ,					
MEDICAL INF		N				
Doctor's Nan	ne			Doc	ctor's Phone	() -
Allergies						
Medical Con	ditions					
Insurance Ca	rrier				Policy #	
EMERGENCY	CONTAC	 Γ INFORMAT	I ON (OTHER TI	HAN PAREN	TS)	
Name			· · · · · · · · · · · · · · · · · · ·			
Home Phone)	_		Cell Phone	()	
1101110	/			0011110110	, ,	
GENERAL RE	LEASE & H	OLD HARMI	ESS AGREEME	NT		
This is to certify t	hat I do hereby	grant permission	for me and/or my ch	ild to participate	in all trips at Fair	view Baptist Church from
September 2022				o !: " .	6	
						and each of the sponsors, individually suffering, mental disorders, property
	•					while engaged in said
activities/trip	-	nen may occur to	the above-hamed pe	articipant or parti	icipants property	Willie eligaged ili sald
· ·		ors to treat, discir	oline, restrain, and au	ıthorize reasonab	ole and necessary	medical care for the above-named
	•	· ·				same should become necessary
where so eve	er the participar	nt may be located				
3. I acknowledge the undersigned shall be liable and agree to pay all cost and expenses incurred in connection with any such medical and						
			t pursuant to this aut			
	that should it b ansportation co	•	ne above minor to ret	turn home due to	o medical reasons	s or otherwise, the undersigned shall
			onsibility to update	the emergency in	nformation contain	ned in this participant form as
necessary.						
			ch to use any photog	graphs and/or vic	deo of the above	student for use in the church and/or
any promotic	onal material for	r the church				

and permitting me and/or my child to participate. It is my expressed desire that the above-named person participate in this activity.

Print Name
Parent/Guardian (If Under 18)

Signature
Parent/Guardian (If Under 18)

The permission, release, and authorization granted herein are given for and in consideration of Fairview sponsoring this activity/trip/sport