

Parent and Youth Release Statement
West River Confirmation Retreat
West River Retreat Center, West River, MD
November 12-14, 2010

As parent/legal guardian of _____
I give my permission for him/her to be involved in the overall activities of the above stated event.

I/we give permission to transport the above named youth across state boundaries when traveling to and from the event.

I/we acknowledge that if the subject of this release has to return home early due to discipline violations, it will be at my/our expensive.

I/we consent to the use of any images, photographs, or any other visual or audio reproduction that may be taken of the subject of this release during this event to be used, distributed, or shown at the discretion of Emmanuel Lutheran Church. I also understand that if the images are used outside of the church youth will never be identified by name without separate, special approval.

I/we understand that all reasonable safety precautions will be taken at all times by Emmanuel Lutheran Church and its agents during the event. I/we understand the possibility of unforeseen hazards and know the inherent possibility of risk. I/we agree not to hold Emmanuel Lutheran Church, its leaders, employees and volunteer staff, or homeowners liable for damages, losses, or injuries incurred by the subject of this form.

Emergency Contact and Phone Number

Please let us know if there is any Special Medical Information that we should know for this event.

Allergies

Medicines that Youth may/will take during the event

Parent/Guardian Signature _____

Youth's Signature _____

Date _____