

## Release of Liability Littleton United Methodist Church

I give permission for my child \_\_\_\_\_ to meet with the Director of Children's Ministries (or designated volunteers) for the purpose of Children's Ministries activities to include but are not limited to: Puppets, Bible study, Children's Worship, Sunday school, special events, etc.

### Parent /Guardian Permission

I hereby give permission for photographs or videos taken of my child to be used for ministry publicity, either printed or electronic. I understand that my child's name will not be disclosed. Parents may request that their child *not be photographed or videotaped* by LUMC staff or volunteers. Parents are not required to give permission for their child to be photographed or videotaped in order to participate in programs.

\_\_\_ **Parent Initial** acknowledges that LUMC MAY photograph or videotape unless given written request to not photograph or videotape.

YES  NO  : I hereby give permission to adult personnel designated by Littleton United Methodist Church to obtain emergency medical services including transportation to the hospital emergency room for my child if immediate medical care is necessary.

YES  NO  : I hereby give permission for Littleton UMC volunteer or staff to administer first aid treatment to my child in any situation encountered while my child is participating in a program with Littleton United Methodist Church.

YES  NO  : I hereby give permission for my child to travel by church van to participate in activities with Littleton United Methodist Church Children's Ministries.

YES  NO  : I understand that my child is expected to follow the directions of all sponsors at all times, not following safety expectations may result in the child being asked not to return. This is for the safety of all participants.

Parent or guardian signature: \_\_\_\_\_  
(Typing of name and submission suffices for signature, or print and submit.)

Date: \_\_\_\_\_ Relationship to the child: \_\_\_\_\_

**All information will be assumed to be current. It is the responsibility of the parent or guardian to update this information as needed.**