

# Bay Shore Community Congregational Church (UCC)

## Youth & Children's Ministry General Release Form

**I/We the parent(s)/legal guardian(s) of:**

\_\_\_\_\_  
(Name of Child or Youth—our Child)

**give permission for our Child to attend and participate in:**

**Nursery Care, Sunday School, Children's Choir, and/or Youth Group**

(And to be taught, coached, and counseled by our Teachers, Church Staff,  
& Youth Leaders during Youth & Children's Ministry activities)

Parent(s)/Guardian(s) Name(s) \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Child's Age, Grade, & Date of Birth \_\_\_\_\_

Restrictions (food, allergies, activities) \_\_\_\_\_

Alternative Pick-Up/Other Emergency Contact(s) \_\_\_\_\_

- ✓ I hereby hold harmless and forever release and discharge Bay Shore Congregational Church from any liability and grant its representatives permission to seek and obtain medical attention for the above named child in the event of an emergency.
- ✓ I understand that the use of drugs, alcohol, and tobacco are strictly prohibited during Bay Shore Congregational Church youth/children's activities.
- ✓ I understand that inappropriate or unsafe behavior on the part of our child will result in a phone call to us to pick up our child from the above activity.

Signature of parent/guardian \_\_\_\_\_ Date \_\_\_\_\_

**Please complete both sides of form and return it to the Church Office. Thank you!**

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## Photograph Release Form

- ✓ I hereby grant Bay Shore Congregational Church permission to use my child's photograph in any and all of its publications, including website pages, without payment or any other consideration. I understand and agree that these materials will become the property of Bay Shore Congregational Church.
- ✓ I hereby irrevocably authorize Bay Shore Congregational Church to edit, alter, copy, exhibit, publish, or distribute these photographs for the purposes of publicizing church programs or other lawful purposes. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my child's likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph.
- ✓ I hereby hold harmless and release and forever discharge Bay Shore Congregational Church from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf of my estate have or may have by reason of this authorization.
- ✓ I hereby certify that I am the parent/legal guardian of \_\_\_\_\_ and have read this release before signing and I fully understand the contents, meaning, and impact of this release. I do hereby give my consent without reservation to the foregoing on behalf of this person.

Parent/Guardian Name (please print) \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Check here and initial, but **do not sign** this form above if you **DO NOT** want Bay Shore Congregational Church to use your child's photograph for any of the above stated lawful purposes.

**Please complete both sides of form and return it to the Church Office. Thank you!**