

# SKATEMINISTRY.ORG

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SkateChurch Release Form (under 18)

Student Name: \_\_\_\_\_

Birthday: \_\_\_\_\_

Parent/Guardian(s) names: \_\_\_\_\_

Address: \_\_\_\_\_

Email address: \_\_\_\_\_

Contact phone # During hrs of 5:00-11:00 PM: \_\_\_\_\_

Primary care physician name: \_\_\_\_\_

Doctor office phone #: \_\_\_\_\_

Medical/ Health insurance company: \_\_\_\_\_

Policy #: \_\_\_\_\_

Medical conditions (allergies, seizures, diabetes, etc): \_\_\_\_\_

In case parent/guardian(s) is/are unavailable, please notify:

\_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_

The undersigned parent(s) of \_\_\_\_\_, this \_\_\_\_\_ day

(students name)

Of \_\_\_\_\_, 201 \_\_, forever release Worship and the Word Movement, SkateMinistry.org, Foothills Community Church, and Warehouse 180 (Colorado non-profit, religious corporations), their staff, employees, directors, officers, elders, agents and members, from any and all liability or claims of and regarding any injuries my/our child suffers while involved in ministry sponsored or related activities. The undersigned does hereby authorize SkateChurch's staff to consent to IMMEDIATE FIRST AID MEDICAL CARE at any hospital, dental office, or elsewhere in the event that the above-listed parent/guardian cannot be reached. I understand that skateboarding is an inherently dangerous activity.

I/we further agree to fully indemnify Worship and the Word Movement, SkateMinistry.org, Foothills Community Church, and Warehouse 180, their staff, employees, directors, officers, elders, agents and members from any and all claims or liabilities arising from the action or activities of my/our child.

Parent/guardian(s) Signature: \_\_\_\_\_ Date: \_\_\_\_\_