

## Activity Participation Agreement

Name of sponsoring organization: Woodmont Baptist Church Children's Ministries

Address: 2001 Darby Drive - Florence, AL 35630

Church Phone: (256) 766-1255

Name of sponsor coordinator: Denise Coats (256) 766-1255 (256) 366-3991

Description of activity: Children's Activities for the Calendar Year 2010

### PARTICIPANT INFORMATION (To be completed by participant or authorized guardian)

Name of participant: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_ Grade: \_\_\_\_\_

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

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_  
(Day) (Evening)

Allergies (if any) \_\_\_\_\_

Is sponsor authorized to approve medical treatment?                      Yes                      No

Is participant covered by personal/family medical insurance?                      Yes                      No

Insurance Company: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Policy Number: \_\_\_\_\_

By signing below, the participant (or parent/guardian if participant is a minor) acknowledges and accepts the risks of physical injury associated with participation in Children's Ministry activities. Except for gross negligence on the part of the sponsor, the participant (or parent/guardian) accepts personal financial responsibility for any bodily or personal injury sustained during activities. Further, participate (or parent/guardian) promise to hold harmless the sponsoring organization and its representatives for any injury related to the activities.

If a dispute over this agreement or any claim for damages arises, the participant (or parent/guardian) agrees to resolve the matter through a mutually acceptable arbitration process.

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_/\_\_\_/\_\_\_