



Middle School Swim Party

Friday, July 30, 2010
7 - 9:30 PM

At Matt Briscoe's House

We will meet at the Family Activity Center at church at 7:00 pm and take the bus to Matt's house. We will return to the church at 9:30 pm.

Hot dogs and hamburgers will be provided.
Please bring soda and chips to share!

Permission slip is required to attend!



CONSENT AND RELEASE FORM
El Camino Baptist Church

I the undersigned parent or guardian, hereby consent for my child, * _____, to participate in **Swim Party at Matt Briscoe's house**, an event sponsored by El Camino Baptist Church on **Friday, July 30, 2010**. On this form, I have disclosed all medical conditions affecting my child and of my child's doctor's name and phone number in the event of an emergency. If there are activities I do not want my child to be involved in, I have listed them below.

I hereby knowingly assume all risks of injury to my child's person, including death, and property that may be sustained in connection with my child's participation in the above event. This assumption of risk on the part of the Undersigned includes, but is not limited to, bodily injury and death resulting from the negligence of El Camino Baptist Church and/or its employees, servants, agents or contractors. The Undersigned acknowledges that unanticipated and unexpected dangers may arise during my child's participation in the above event. Possible unanticipated and unexpected dangers include, but are not limited to, slipping, falling, and any and all injuries, including death, resulting from vehicle accidents (if being transported by El Camino staff, employees, servants, agents or contractors).

I do hereby agree to hold El Camino Baptist Church and/or its employees, servants, agents, or contractors, harmless from any and all liability, actions, causes of action, claims, expenses, and damages on account of injury to my child or property, even injury resulting in death, which I now have or which may arise in the future in connection with my child's participation in the above event. The scope of this release includes, but is not limited to, all claims for negligence against El Camino Baptist Church and/or its employees, servants, agents, or contractors, including claims for negligence resulting in bodily injury or death.

_____ Signature	_____ Relationship to Child	_____ Date
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Medical conditions affecting my child _____

Emergency Contact Phone Numbers _____

My child's doctor and phone number (in case of emergency, we will contact you first, then your child's doctor)

I do not wish my child to participate in:

**All blanks must be completed*

El Camino is not responsible for and will not replace personal property lost, stolen, misplaced or wet.