

**Forest Hills Fellowship Baptist Church
Soccer Bible School
Information Form**



BASIC INFORMATION

Name: _____

Address: _____
Street

_____ City Province Postal Code

Phone # _____
home

Health Card # _____ Expiry date: _____

Please list any health concerns we should know about _____

Email: _____

Emergency contact Names _____
and numbers _____

YOUR RELATIONSHIP WITH GOD

Are you a Christian? (Is Jesus the Lord of your life?) Yes No

Do you attend church on a regular basis? Yes No

Have you helped out at our Soccer Camp before? Yes No

WAIVER FORM

Name _____

Address _____

City _____ Prov. _____ PC _____ Phone _____

Functions and Activities

It is my understanding that participating in the programs and recreational and other activities of FOREST HILLS FELLOWSHIP BAPTIST CHURCH-SOCCER BIBLE CAMP is a privilege. Prior to my participation in such activities, I acknowledge that there are certain risks associated with the activities, including, by way of example, but not limited to, physical injury due to activity-related accidents, illness, or even more serious consequences. In addition, I acknowledge that there may be other risks inherent in these activities of which I may not be presently aware.

Release of Liability

By signing this Permission/Waiver Form, I that I am capable of withstanding both the physical and mental demands of the activities discussed above. I also expressly assume all risks of the child or me participating in the activities, whether such risks are known or unknown to me at this time. I further release FOREST HILLS FELLOWSHIP BAPTIST CHURCH and its ministers, leaders, employees, volunteers, and agents from any claim that my child may have or that I may have against them as a result of injury or illness incurred during the course of participation in the activities. This release of liability shall include (without limitation) any claims of negligence or breach of warranty. This release of liability is also intended to cover all claims that members of the child's or my family or estate, heirs, representatives, or assigns may have against FOREST HILLS FELLOWSHIP BAPTIST CHURCH or its ministers, leaders, employees, volunteers, or agents.

I further agree to indemnify and hold harmless FOREST HILLS FELLOWSHIP BAPTIST CHURCH and its ministers, leaders, employees, volunteers, or agents from any and all claims arising from my participation in its activities and programs, or as a result of injury or illness of my child during such activities.

Signed by _____ Date: _____