

SHERWOOD BAPTIST CHURCH
Parental Authorization, Consent, and Release

Sherwood Baptist Church of Albany, Georgia, Inc. (the "Church") is organizing or planning a certain "Event" or activity generally described as **SHERWOOD STUDENT CAMP 2026** I wish for my child to participate in the Event.

Please print all answers legibly. Do not leave any blanks.
If the answer is none, then write "none" in the space provided.

Student's Name _____ Age _____ Grade _____
Address _____ City, State _____ Zip _____
Student's cell # (if applicable) _____

Parent/Guardian Name _____
Phone (C) _____ (W) _____
Email Address _____

Emergency Contact _____ Phone _____
Emergency Contact _____ Phone _____

Student's Medical Profile and History

Generally, my child's health is (circle one): Excellent Good Fair Poor
If fair or poor, please explain why: _____

Circle the following conditions or diseases that apply to your child:

- | | | | | |
|---------------------|-------------------|--------------------|------------------|-----------|
| ADD/ADHD | Tuberculosis | Anxiety Attacks | Thyroid Disorder | Asthma |
| Diabetes | Diagnosed Phobias | Dizziness/Fainting | Epilepsy | Anemia |
| GI/Stomach Disorder | Hypoglycemia | Hypertension | Kidney Disorder | Migraines |
| Heart Disorder | Chronic Headaches | Meningitis | | |

Are there any other conditions or diseases that your child currently has or for which he/she is receiving treatments? These may include psychological conditions as well as physical conditions. If so, please specify the condition and the treatment, if any, he/she is receiving. _____

Please list all allergies your child has. These may include allergies to certain food, medication, insect bites or stings, pollen, plants, animals, etc. _____

Please describe any other special medical needs or conditions your child has. These may include significant hearing loss, sight or speech impairments, various physical disabilities, **restricted diet**, etc.

Health/Medical ID Information (Insurance information: include Name of Insurance, Group No., and ID)

Is there anyone who is NOT allowed to pick up your child from the event listed above? Please list.

To be completed by the parents or legal guardians of students under 18 years of age.

I, _____ (Parent/Guardian's Name) the parent/legal guardian of _____ (Child's Name), a minor ("Child"), hereby acknowledge and agree:

1. My Child may participate in the Event.
2. I certify and affirm that I have been completely and thoroughly informed that as a youth attending the Church, my Child will participate in certain activities which carry with them a degree of risk and danger. Examples of risky and dangerous activities, and hazards both foreseeable and unforeseeable include, but are not limited to:
 - outdoor physical activities;
 - sports, both informal and organized;
 - use of recreational equipment;
 - travel
 - activities around water, including swimming, wakeboarding, and boating;
 - hiking;
 - camping;
 - accidents or collisions; and
 - inclement weather.These risks and hazards may result in serious physical injury, sickness, or death, and damage to, loss, or destruction of property, and no guarantee can be made that the Church or others can provide assistance if any of the foregoing result.
3. If my Child is injured or needs medical attention while participating in the Event, I give the Church, its employees and volunteers, permission to seek medical diagnosis and treatment which in their best judgment they deem to be necessary or appropriate under the circumstances.
4. In cases of emergency, I further consent to the examination or treatment of my Child by a physician duly licensed to practice medicine or any health care professional duly licensed to provide health care services in the State of Georgia for medical care and services deemed necessary by the Church, its agents, servants, and employees.
5. I give permission to the doctor or health care professional to provide any and all medical care they deem, in their professional opinion, to be necessary.
6. I agree to pay for any and all medical expenses incurred as a result of the use of this consent.
7. I also agree to fully release and hold harmless the Church, its pastors, employees, agents, borrowed servants, contractors, and other workers, paid or volunteer, or their heirs and assigns, from any and all injuries, claims, liabilities or causes of action which may arise from the transportation or participation of my Child in the Event.
8. I acknowledge and understand that the Church may offer other activities not listed above that present similar risks or dangers to my Child.

9. I consent to my Child's participation in these activities. I acknowledge and understand that this PARENTAL AUTHORIZATION, CONSENT, AND RELEASE has the same force and effect regardless of whether the activities engaged in are free or if a fee is charged.
10. Further, I personally assume, on my Child's behalf, all risk in connection with said activities for any harm, injury or damages that may befall my Child as a result of my Child's participation in the activities, whether foreseen or unforeseen, and I still wish to allow my Child to proceed with the activities.
11. In consideration of my Child being allowed to participate in these activities and to use Church equipment, on behalf of my Child, I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless the Church from any and all claims, demands, or causes of action, which are in any way connected with my Child's participation in these activities or use of the Church's equipment, whether owned or offered for use by various Church members and/or volunteers.
12. I understand that it is my obligation to inform the management of the Church of any and all health considerations or medical conditions that would restrict my Child's participation in the Event.
13. I acknowledge that I am not aware of any condition or limitation that would dictate not having my Child participate in the Event. I will not allow my Child to participate in the Event should I become aware of any such condition or limitation and will not allow my Child to participate in the Event should he/she have any illness or disease which I reasonably understand to be contagious to others or would put others in jeopardy of contracting such illness or disease.
14. Should the need for medical attention arise, the Church will attempt to contact you, as soon as practicable under the circumstances.
15. By signing this PARENTAL AUTHORIZATION, CONSENT, AND RELEASE agreement, I acknowledge that if anyone is hurt or property is damaged during my Child's participation in these activities, I may be found by a court of law to have waived my right to maintain a lawsuit against the Church on the basis of any claim from which I have released them herein.
16. I agree that if any portion of this PARENTAL AUTHORIZATION, CONSENT, AND RELEASE agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.
17. I consent to the use of my Child's photograph, likeness, image, voice or performance on the Church's internet website, CD or DVD labels, video tape or film clips, advertisements, or other official Church publications at the sole discretion of the Church and to be used in whole or in part of any and all broadcasting, audio/visual, and/or exhibition purposes in any manner or media, in perpetuity, throughout the world.
18. I have fully informed myself of the contents of this PARENTAL AUTHORIZATION, CONSENT, AND RELEASE by reading it before I signed it.
19. I agree that any and all claims or disputes arising from or related to this PARENTAL AUTHORIZATION, CONSENT, AND RELEASE agreement, other than a claim for injunctive relief, shall first be submitted to mediation in Dougherty County, Georgia with a panel of one (1) mediator, and if not resolved by mediation, then by binding arbitration in Dougherty County, Georgia, with a panel of one (1) arbitrator under, and in accordance with, the then governing rules of The Institute for Christian Conciliation. In the event that the Institute for Christian Conciliation ceases to exist during the course of this PARENTAL AUTHORIZATION, CONSENT, AND RELEASE agreement, arbitration under this Section 19 shall be conducted according to the rules of the American Arbitration Association. Judgment upon an arbitration award may be entered in the District Court for the County of Dougherty, Georgia. The Church and I shall bear our own costs related to any mediation or arbitration proceeding. Nothing contained herein shall prevent the Church from filing any action in a court of competent jurisdiction for the limited purposes of outlining and supervising the enforcement of the mandatory arbitration process and of issuing any injunctive or similar preliminary relief as may be deemed appropriate by such court in advance of the issuance of any arbitration award.
20. This PARENTAL AUTHORIZATION, CONSENT, AND RELEASE agreement represents the entire understanding of the parties and may not be amended unless mutually agreed to by both parties in writing.

Parent and/or Legal Guardian _____ Date _____
 (Signature)

 (Printed Name)