

VIRGINIA BEACH UNITED METHODIST CHURCH FAMILY SURF MINISTRY PERMISSION/RELEASE FORM

Child's Name: _____ Birthdate: _____ Age: _____

School _____ Grade: _____

Parent/Guardian/Adult Name: _____

Address: _____ City: _____ Zip: _____

Email Address: _____

Home Phone: _____ Cell Phone: _____

Previous Surf Experience

None (1st time experience) 1-2 times Beginner

PERMISSION FORM AND ACKNOWLEDGMENT OF RISKS

I am the parent or legal guardian of the child named above. I give permission for my child to participate in the Virginia Beach United Methodist Church Family Surf Ministry.

I am aware that surfing is an activity that poses potentially serious risks of injuries or death to participants. I am aware of the intrinsic dangers of surfing. I have or will investigate all risks involved with my child's and/or my participation in Virginia Beach United Methodist Family Surf Ministry.

I understand that the adults assisting with the Virginia Beach United Methodist Church Family Surf Ministry are volunteers.

I agree to participate and/or give permission for my child to participate in the Virginia Beach United Methodist Church Family Surf Ministry in spite of and with full knowledge of the inherent risks.

Name (Parent/Guardian)

Signature

Date

PHOTOGRAPH RELEASE

Regarding photographs taken at Surf Ministry, I give Virginia Beach United Methodist Church permission to do the following for non-profit use and without charge. At the discretion of Virginia Beach United Methodist Church, photos may be displayed at a service or event or be used in a multimedia presentation, reprinted and distributed for any Virginia Beach UMC non-profit publication, with copyright to accompany the photos when used (for example, in the Weekly News, brochures, etc.) or to display on the Virginia Beach United Methodist Church web and facebook site. Individual names will not be associated with photos.

Yes No

SIGNATURE _____ DATE _____