

Legacy Church YOUTH MINISTRIES
Parent/Guardian of a Minor
Waiver of Liability Form

Event name/dates: _____

Dept sponsoring event _____ Event location: _____

Student's full name: _____

Student's address: _____

Street address _____ City _____ State _____ Zip _____
Student's birthdate: _____ Sex: M F Student's grade in school: _____

Parent/guardian names living w/student _____ Phone: _____

Alternate contact/relationship: _____ Alt. Phone: _____

Medical ins. Carrier: _____ Medical record # _____ Doctor _____

Any restrictions? Yes (list below) No

**I, _____ (printed name of parent/guardian) being
the parent or legal guardian of _____
(printed name of minor) have been informed of the above activity sponsored by LEGACY
Church and hereby give my consent for my minor child to participate in the activity(ies)
and/or event(s) as described above.**

I also understand that my minor child is to be excluded from the following activities:

**I understand that all reasonable safety precautions will be taken by the leaders of this
activity, and that the possibility of an unforeseen hazard does exist. I further agree not to
hold LEGACY Church, its leaders, employees, and volunteer staff liable for damages,
losses, diseases, or injuries incurred by the minor listed on this form.**

Signature of parent/guardian: _____ Date signed: _____