

**First United Methodist Church (“church”)
MINISTRY DEPARTMENT ACTIVITY WAIVER**

The undersigned parent/legal guardian hereby give permission to First United Methodist Church, for my minor (insert minor’s name) _____ to take part in any and all activities for the dates of June 1, 2022 – May 30, 2023.

Should my minor require immediate or emergency medical care while engaged in an activity sponsored by the Church, in my absence, I hereby grant the Church authority to release my minor for medical treatment to such medical personnel as the Church determines appropriate under the circumstances.

Minor’s Allergies/Medications: _____

Date: _____ Parent/Guardian Signature: _____

Telephone number(s): Cell/Home _____ Work _____

Emergency Contact: _____

Emergency Number: _____

Special instructions or medical conditions: _____

Parent/Guardian Signature: _____

Photo waiver: Moultrie FUMC has permission to post photos of my child or use photos in church promotions and advertisements, including website and social media. _____ yes _____ no

Notary Section:	
State of ____ County of _____ My commission expires on _____	
Notary Public’s Signature	Notary Public’s Name

The above signed parent or legal guardian has the following form of health/accident insurance covering the minor:

Company

Member Number