

Authorization and Release

I, _____, the parent of _____ (the "Child"), grant my permission for the Child to participate in any "Function" at Building Blocks pre-school. "Function" is defined as a ministry, party, class, child care, activity, trip or other gathering specifically designed or planned for enrolled students and sponsored or supported by the First United Methodist Church, d/b/a Keller United Methodist Church and/or Building Blocks Pre-School (collectively, the "Church"). This will include Functions both on and off the property of the Church.

I warrant and represent that I have the authority to make medical care decisions for the Child, and:

1. I HEREBY RELEASE AND FOREVER DISCHARGE THE CHURCH AND ALL OF ITS REPRESENTATIVES, AGENTS, ATTORNEYS, PRINCIPALS, EMPLOYEES, OFFICERS, DIRECTORS, PARTNERS, VOLUNTEERS, PARENTS, SUBSIDIARIES, AFFILIATES, SUCCESSORS, HEIRS AND ASSIGNS FROM ANY AND ALL ACTIONS, CAUSES OF ACTION, LIABILITIES, SUITS, DEBTS, CLAIMS OR DEMANDS FOR ANY LOSS ARISING FROM THE CHILD'S PARTICIPATION IN A FUNCTION; and,
 2. ON BEHALF OF MYSELF AND THE CHILD AND ANY OF OUR REPRESENTATIVES, AGENTS, ATTORNEYS, PRINCIPALS, EMPLOYEES, OFFICERS, DIRECTORS, PARTNERS, VOLUNTEERS, PARENTS, SUBSIDIARIES, AFFILIATES, SUCCESSORS, HEIRS AND ASSIGNS, I AGREE TO INDEMNIFY AND HOLD HARMLESS THE CHURCH FROM ALL CLAIMS AND CAUSES OF ACTION ARISING FROM THE CHILD'S PARTICIPATION IN A FUNCTION; and
 3. I authorize the Church to furnish any transportation or food, and/or seek medical care/treatment it deems necessary for the Child. I authorize the Church to incur such costs as are reasonably necessary on my behalf, and I will be responsible to pay for any costs arising from such authorization. It is my sole responsibility to seek coverage from my own insurer, if any, and I remain responsible for such costs regardless of insurance coverage or denial; and
 4. I grant permission for the Child to participate in Functions as defined above.
 5. I grant permission for the Child to be photographed throughout the year at various activities for classroom use and/or display.
 6. I grant permission for my child's photograph to be used in church publications, websites or on social media; OR
_____ DO NOT publish photographs (Please initial if you would prefer no photographs published.)
 7. I understand that the Church does not administer medications, except for emergency or rescue medications for a medical problem such as asthma or allergic reactions. A separate authorization form must be completed for these conditions. If applicable, I have provided to the church a Food & Allergy Anaphylaxis Emergency Care Plan (FARE) for the Child. I understand that the Church will follow the FARE plan to the best of its ability, but does not guarantee compliance.
 8. I will be responsible for requesting vision and hearing screening from the Child's Physician beginning at age 4, which will be documented on the Health History form.
 9. I will provide my child's lunch while in attendance at Building Blocks. I further understand that the Church is not responsible for my child's lunch's nutritional value or for meeting my child's daily food needs.
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10. I acknowledge that the Church has provided me with a Parent's Handbook of the Building Block's operational policies including the Guidance and Discipline Policy.

Signature

Parent of _____

Before me, the undersigned authority, on this day personally appeared _____ known to me to be the person whose name is subscribed above and acknowledged to me that he/she executed the same for the purpose therein expressed.

Sworn and subscribed before me this _____ day of _____ in the year _____.