

**Rock Solid Youth  
Ministry of Living Rock Church  
138 Route 81  
Killingworth, CT 06419  
Liability Release Form**

I \_\_\_\_\_ hereby give permission for my child(ren)  
Parent/ Legal Guardian's Name  
\_\_\_\_\_ to attend     R&R     at  
Child(s) Name  
    Mike & Sarah White's home, 125 Meetinghouse Lane, Westbrook, CT      
from     7 pm     to     9:30 pm     on     Friday, November 20, 2009, January  
    15, 2010, Feb. 19, 2010, March 19, 2010, April 16, 2010, May 21, 2010    .

I do hereby release, forever discharged and agree to hold harmless the Living Rock Church Ministry, personnel, workers, counselors and the directors thereof from any liability, claims or demands for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the participant that occur while said person is participating in the above-described trip or activity including recreation and work activities. The undersigned further hereby agrees to hold harmless and indemnify said church said church, its directors, employees and agents for any liability sustained by said acts of said participant, including expenses incurred attendant thereto.

The undersigned further consents to the administration of first-aid and/or doctor's care, or any other form of medical treatment necessitated by illness or injury that may require the same. In the event of the necessity of such care or treatment as heretofore described, the undersigned agrees to hold harmless and indemnify said church, its directors, employees, and agents from any act of malfeasance, and/or failure to act on the part of those chosen to administer medical care on behalf of the participant.

Please fill out the following:

Name of Child (ren): \_\_\_\_\_  No Insurance

Name of Insurance Company \_\_\_\_\_

Name of Insurance Participant: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Child (ren)'s I.D. Number: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Work Telephone: \_\_\_\_\_

List of any allergies to medications, etc.: \_\_\_\_\_

Emergency Contact person: \_\_\_\_\_

**Parent's or Legal Guardian's Signature:**

\_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\* Parent's Please Tear Off and Keep Information Below \*\*\*\*\*

Rock Solid Youth:     R&R @ the White's – 3<sup>rd</sup> Friday of the Month (no 12/09)      
Drop Off Time:     7 pm @ White's, 125 Meetinghouse Lane, Westbrook, CT      
Pick Up Time:     9:30 pm @ White's