

Attachment D
RELEASE OF LIABILITY/PERMISSION FOR TREATMENT
First United Methodist Church, Graham, TX

STATE OF TEXAS
COUNTY OF YOUNG

FOR MINORS (Revised*)

I, _____, the parent of _____, who is _____ years of age, in consideration for allowing my child to ride as a passenger in any van or other vehicle owned by FIRST UNITED METHODIST CHURCH OF GRAHAM, TEXAS, **Waive and Release** the First United Methodist Church of Graham, Texas, from any claim which I may have by reason of the injury and/or death of my child while riding as a passenger.

I also agree to indemnify and hold harmless the First United Methodist Church of Graham, Texas, from any and all claims by my child and any other person that may arise by reason of the injury and/or death of my child, including, but not limited to, claims arising from the negligence or fault of the First United Methodist Church of Graham, Texas, its agents, members, servants, and/or employees.

I do hereby grant permission to chaperones and sponsors to seek medical attention for and administer necessary basic first aid to the above mentioned person. Please see the **Emergency Medical Form** for information about special medical needs or health history that concerns this person, as well as pertinent health insurance information.

EXECUTED this _____ day of _____, _____
(Date) (Month) (Year)

***STOP:** This must be signed in the presence of a notary*

Parent/Guardian Signature

STATE OF TEXAS
COUNTY OF YOUNG

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This instrument was acknowledged before me by _____ on the _____ day of _____, _____
(Date) (Month) (Year) (Signer's Printed Name)

Notary Public, State of Texas