

IMMANUEL LUTHERAN YOUTH GRO	UP
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Student's Name:	Grade:			
Father's Name (First and Last)				
Mother's Name (First and Last				
Street Address	City	State	Zip Code	
Home Phone	E-Mail			
Phone number you can be reached at				
during meetings:				
<u>Please check membership / attendance status:</u>				
Immanuel Member				
Member of another church (Where?)	
Not a church member				

Publicity Permission:

We will be taking pictures and possibly videos throughout the year of various activities and these may be used for publicity purposes on our web site, in our monthly newsletter and on flyers and invitations used to promote our program. No names. Only pictures will be used. Please sign below, indicating your permission to use your child's photograph for these purposes.

I give my permission for Immanuel Ev. Lutheran Church to use my child's photograph for its Children's Ministry Program publicity purposes.

Parent	Signature_
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Date

Please continue to the back or next page

Medical Release / Liability Waiver:

As a parent or guardian, I do herewith authorize the treatment, by a qualified and licensed doctor, of the following minor in the event of a medical emergency which, in the opinion of the attending physician may endanger his/her life, cause disfigurement, physical impairment or undue discomfort if delayed. The authority is granted only after a reasonable effort has been made to reach me. This release is effective from August 5, 2023 through July 1 2024.

Emergency Contact (other than yourself):	
Phone:	
Family Physician :	Phone

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. As a result, federal, state, and local governments and agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people. We are doing everything we can to be compliant with all regulations and ensure your safety. We have put in place preventative measures to reduce the spread of COVID-19, but we cannot guarantee that you or family members will not become infected with COVID-19.

By participating in programs, services, and activities of Immanuel Evangelical Lutheran Church, you agree to the following:

On behalf of yourself and your children, you hereby release, covenant not to sue, discharge, and hold harmless Immanuel Evangelical Lutheran Church, its employees, agents, and representatives, of and from all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating to your participation in our programs, services or activities. You understand and agree that this release includes any claims based on the actions, omissions, or negligence of this organization, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any such program, service or activity.

This release form has been completed and signed of my own free will with the sole purpose of authorizing medical treatment under emergency circumstances in my absence. In addition, I, the undersigned, waive responsibility of Immanuel Ev. Lutheran Church and all workers of the Children's Ministry program if accident or injury occurs to my child under normal circumstances of participation in the Immanuel Children's Ministry Programs.

Parent/Guardian Signature:	_Date
Please either print, fill out and mail to:	
Immanuel Ev. Lutheran Church	
1116 E. Devon Ave.	
Bartlett, IL 60103	
or email to: immanuelbartlett@sbcglobal.net	
Any questions please call the church at (630) 837-1166	