

# St. Thomas United Church

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## PARENT/GUARDIAN APPROVAL, ACKNOWLEDGEMENT AND RELEASE FORM

\_\_\_\_\_  
Participant's Name

I/We the parents (and/or Guardians) of the above named participant, hereby give our approval and acknowledgement to his/her participation in programs offered by St. Thomas United Church between September 1, 2019 and June 30, 2020. (See attached letter for examples of activities.)

I/We do hereby acknowledge and agree that the participation of our child, above named, is at our sole risk and liability; moreover, we hereby release and agree to hold harmless St. Thomas United Church, the instructor, coordinator, leader or any responsible appointed adult from any and all actions, the cause of actions, claims liability and demand whatsoever arising out of or in any way related to or connected with this program without limitations.

I/We do hereby consent to any medical attention or any other care or treatment considered necessary.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date

Alberta Health Care Number: \_\_\_\_\_

Please note any health problems, allergies, or special medication required:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_