

Youth registration form for 2020/2021

Richmond Park MB Church

1525-26th Street, Brandon, MB R7B 2C3 www.richmondparkchurch.ca

Parents/Guardians _____

Home Address _____

Home Phone _____ Cell Phone _____

Family E-mail _____

Emergency Contact _____

Children's Names				
Date of Birth				
Grade				
Family doctor				
Allergies/other concerns				
Medical number				

Medical authorization – I/we, the parents/guardians named above, authorize RPC ministry staff to sign a consent for medical treatment and to authorize any physician or hospital to provide medical assessment, treatment of procedures for the participant/s above.

I/We, named above, undertake and agree to indemnify and hold blameless the ministry staff of Richmond Park Church its pastors and board from and against any loss, damage or injury suffered by the participant as a result of being part of the activities of RPC as well as any medical treatment authorized by the supervising individuals representing the church. This consent and authorization is effective only when participating in or traveling to events of the Richmond Park Church.

Photos – Please initial below to grant permission for the reasonable use of pictures containing your child in any or all of the following ways:

_____ Printed picture _____ Website/online photos _____ Video

Activities - I, (Parent/guardian) _____ give permission for (child/children) _____ to participate in weekly youth programming on site at Richmond Park Church and in the greater Brandon area.

Parents signature _____

Printed name _____ Date _____

For more information, contact rpc@wgcwave.ca.