

HIGH POINT EDUCATIONAL AND MISSIONARY BAPTIST ASSOCIATION, INC.

Reverend Dr. John A. Jackson, Moderator

(Please fill out completely)

CHURCH _____

Student Name _____ Date of Birth ____/____/____ Age ____

*Siblings? *If so, list names and ages by 07/20/2009* _____

Home Address: _____ City _____

Telephone: Home _____

Parent/Guardian Name _____

Parent's Work # _____ Parent's Cell _____

Alternate emergency contact name _____

Contact's Phone # _____ Relationship to student _____

List any allergies (food, dairy, medications etc.) _____

Comments or special instructions _____

List any medical condition we need to be aware of _____

Special instructions _____

T- Shirt size:

____ Youth small ____ Youth medium ____ Youth large

____ Adult small ____ Adult medium ____ Adult large ____ Adult xl ____ Adult 2x ____ Adult 3x ____ Adult 4x

Please add any additional information you feel is important for staff to know regarding your child.

CHILDREN'S ACTIVITY INTEREST (Ages 3-12 only)

(CHOOSE ONE A-G.)

- a) Craft (Ages 6-9) _____
- b) Cooking (Ages 9-12) _____
- c) Step (Ages 8-12) _____
- d) Music/Choir (6 to 12yrs) _____

- e) Mime (Ages 6-12) _____
- f) Dance (Ages 6-12) _____
- g) Woodworking (Ages 10-12) _____

YOUTH & CHILDREN'S TRAC 2009 LIABILITY RELEASE FORM

Youth & Children's Trac is a component of the High Point Educational and Missionary Baptist Association, Incorporated. Children's Trac will convene at Mt. Carmel MBC, W-S, NC, Bishop A. T. Griffey, III, pastor.

Please read carefully, a parent's signature is required...

I understand and hereby agree to assume all of the risks which may be encountered on said activities, including activities preliminary and subsequent thereto. I do hereby agree to hold the High Point Educational and Missionary Baptist Association, Inc., as well as the hosting churches and its agents, employees and volunteers harmless from any and all liability actions, causes of actions claims, expenses and damages on account of injury to my child or property, even injury resulting in death, which may arise in the future, in connection with participation in the described activity or in any other associated activities.

{Child's Name} _____ has my permission to attend Youth & Children's Trac 2009, and all its sponsored trips and activities. I also give permission for my child to be videotaped or photographed during activities related to the convention. I also realize these images may be used in future publications for Youth and Children's Trac, i.e., Newsletter, website, etc. or the H.P.E.M.B.A.

Special Instructions

Signature: (Parent or guardian) _____

Date _____

Parents: You are ultimately responsible for your child's behavior and will be contacted should problems arise. Thank you!