

Cross of Hope Parental Consent & Release of Liability Form

I, the undersigned parent or guardian of _____, a minor, do hereby grant permission for my child to participate in the Mid High Youth lock-in at Cross of Hope on _____ (dates & times). I also authorize my child to participate in local travel and all other activities associated with the lock-in. I also authorize the lock-in sponsors to secure such medical advice and services as may be deemed necessary for the health and safety of my child if I cannot be reached. I agree to accept financial responsibility for any such advise and services. I hereby release Cross of Hope Lutheran Church and all representatives and sponsors from responsibility and liability for any injury or illness that my child may sustain during this event listed.

(Please print the following information)

Name of Participant: _____

Parent or Guardian: _____

Address: _____

City: _____ State: _____ Zip: _____

Signature of Parent or Guardian: _____

Note to Sponsors:

Attach a copy of the MHY registration form.