

Apostolic Faith Church

Underage Camper Guardianship Release Agreement

I hereby give my permission for (minor's name) _____ DOB _____
(M/F), to attend the Apostolic Faith Camp Meeting Convention held at (city, state) _____
from (date) _____ to (date) _____. An approved guardian (named below)
has agreed to assume responsibility for him/her during that time. I understand that my child is expected to obey
the guardian, the campground rules, and the church authorities; my child understands this also. If the guardian
I have chosen should prove unsuitable, or if my child fails to uphold his/her part of this agreement, I understand
that our pastor and/or the campground supervising authority will take whatever steps are necessary to protect the
physical and spiritual well-being of my child, while upholding the rules and regulations of the organization.

Parent/Legal Guardian _____
Address _____
City, State, and Zip _____ E-mail _____
Home Phone _____ Work _____ Cell _____

In the event of an emergency, if I cannot be reached, please contact the following:

Emergency Contact #1 _____ Relationship to Minor _____
Address _____
City, State, and Zip _____ E-mail _____
Home Phone _____ Work _____ Cell _____

Emergency Contact #2 _____ Relationship to Minor _____
Address _____
City, State, and Zip _____ E-mail _____
Home Phone _____ Work _____ Cell _____

Primary Medical Insurance: _____ Group/ID # _____

Medications the minor is using: _____

Allergies the minor has: _____

Are there any medical or behavioral conditions that the guardian should be aware of?

I acknowledge that attendance at the camp meeting involves risk to my child (and to the child's parents or guardians, since the child is a minor) and may result in various types of injury including but not limited to, the following: sickness, bodily injury, death, emotional injury, personal injury, property damage, and financial damage. I authorize the guardian, my child's pastor, and/or the campground supervising authority to take any steps deemed necessary for the well-being of my child in the case of an emergency. I also agree to accept responsibility for any medical expenses incurred as a result of any such injury sustained.

In consideration for allowing my child to attend the camp meeting, I, individually and in my capacity as parent, legal guardian, or responsible person for the child listed above, do waive and release the Apostolic Faith Church and its agents, directors, officers, employees, and volunteers from all claims or liability which may arise from the stated church event; this includes damage, loss, or injury to me, my spouse, any of my children, my property, or the property of my children. In the same capacity, I promise to indemnify, defend, and hold harmless the event sponsor for any injury arising directly or indirectly out of the described event or transportation to and from the event, whether such injury arises out of the negligence of the event sponsor, the participant, or otherwise.

Signature of Parent/Legal Guardian: _____ Date: _____

Printed Name: _____

Guardian Agreement

I hereby certify that I have met the eligibility requirements established by the Apostolic Faith Church for prospective guardians of minors in the absence of the child's parent/legal guardian. I am over the age of twenty-one, regularly attend the Apostolic Faith Church, and expect to reside on the campground during the time the above named child plans to be there. I have submitted an *Apostolic Faith Church Guardian Application* form to my pastor. I further certify that I fully understand the responsibilities of guardianship, having read the document titled *Procedure Guidelines for Camp Meeting Guardians*, and that I have been approved by my pastor. I have discussed with the child's parent/legal guardian the steps to be taken if a medical need arises and I will keep them informed about the care being administered to their child in such an event. If I do not fulfill my agreement to properly supervise the child in accordance with the *Procedure Guidelines for Camp Meeting Guardians*, I understand that my pastor and/or the campground supervising authority may take whatever steps are necessary to rectify the matter, including termination of this Guardianship Agreement.

Signature of Prospective Guardian: _____ Date: _____

Printed Name: _____

Minor Child Agreement

I have read the above agreements and understand my responsibilities as described in the document titled *Procedure Guidelines for Camp Meeting Guardians*. I agree to follow the instructions as stated.

Signature of Minor Child: _____ Date: _____

Printed Name: _____

Pastor Agreement

I give my permission for the above named minor to stay on the campground and for the above named adult to serve as his/her guardian during the (year) _____ Camp Meeting Convention.

Signature of Pastor: _____ Date: _____

Printed Name: _____