

# Preteens

## Waiver and Consent Form

This form covers regularly scheduled programs and special events throughout January 2026 to December 2026

Name: \_\_\_\_\_ Male:  Female:

Birthday: \_\_\_\_\_ (DD/MM/yyyy) Grade: \_\_\_\_\_

Care Card #: \_\_\_\_\_

### Emergency Contact:

Parent/Gaurdian: \_\_\_\_\_ Phone #: \_\_\_\_\_

E-mail: \_\_\_\_\_

Precautions are taken for safety and health of your child, but in the event of accident or sickness, RPC, its staff, and its volunteers are hereby released from any liability. In the event that your child requires special medication, x-rays or treatment, the parent/ guardian will be notified immediately. Your child must be covered by Provincial Health Insurance or equivalent medical insurance.

I/we the undersigned parent(s) ore legal guardian(s) of the child listed below, declare that I/we voluntarily assume all risk of personal injury, loss of property, damage which may arise from participation in or attendance at functions and special events held at Richmond Pentecostal Church as well as special events held elsewhere, including travel to and/or from these functions, whether such injury, loss or damage shall arise from negligence or otherwise. Richmond Pentecostal Children's ministries uphold the standard that children respect the rights and property of others. If this behaviour cannot be maintained, the organisation reserves the right to withdraw the child from the program or withhold the rights to participate in future events.

### Photo Consent

By signing below, I hereby give Richmond Pentecostal Church permission to take photographs and/or a video of my child. It is likely that these images may be used as:

- a record of the activity or the event
- in a written evaluation report of the activity or event that will be viewed by RPC.
- publicity material for further activities or events on RPC run accounts (I.e. Websites, Social media Etc.)
- illustrations of the activities or events in published articles
- future grant applications

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Name of Child

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Name of Parent/Gaurdian

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Date

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Signature of Parent/Gaurdian

