

# Christmas Crafts for Kids Registration

\*Child's Name(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*Parent's Name: \_\_\_\_\_

\*Address: \_\_\_\_\_

\_\_\_\_\_

\*Phone: \_\_\_\_\_

\*Who will pick them up:  Same as dropped them off  Other: \_\_\_\_\_

Email: \_\_\_\_\_

## FOR OUR BENEFIT, AND IN ORDER TO RESPECT YOUR WISHES, PLEASE ANSWER THE FOLLOWING QUESTIONS:

Do you have a church home?  Yes, Faith Lutheran  Yes, other  No

Would you like more information about our church?  Yes  No

I give Faith Lutheran permission to take a picture of my child(ren)?  Yes  No

I give Faith Lutheran permission to post a picture of my child(ren) within the church buildings of

Faith Lutheran?  Yes  No

I give Faith Lutheran permission to post a picture of my child(ren) on the website or Facebook page of

Faith Lutheran?  Yes  No

Please take a moment and share with us how you found out about our Christmas Crafts for Kids event.

\_\_\_\_\_ Postcard \_\_\_\_\_ Poster in town \_\_\_\_\_ Invited by friend

\_\_\_\_\_ Newspaper \_\_\_\_\_ Facebook \_\_\_\_\_ Word of mouth

\_\_\_\_\_ Road Sign \_\_\_\_\_ Other:

~ over ~

# CHRISTMAS CRAFTS FOR KIDS WAIVER FORM

## Participant Agreement

I acknowledge that participation in the activities of this activity involves risk to the participant (my child(ren) or the minor(s) I have signed up today), and may result in various types of injury including, but not limited to, the following: sickness, exposure to infectious/communicable disease (COVID-19 and other), bodily injury, emotional injury and death.

With full awareness and appreciation of the risks involved, I, on behalf of my child(ren) (or minor(s) I have signed up) agree to release and promise to indemnify and hold harmless Faith Ev. Lutheran Church and its volunteers for any and all injury arising directly or indirectly out of this activity, whether such injury arises out of the negligence of the activity sponsor, the participant, or otherwise. I accept personal financial responsibility for any injury or other loss sustained during this activity, as well as any medical treatment rendered to the participant that is authorized by Faith Ev. Lutheran Church or its volunteers.

By signing below I acknowledge and represent that I have read the foregoing Waiver of Liability, understand it and sign it voluntarily as my own free act and deed. I am sufficiently informed about the risks involved in this activity in relation to COVID-19.

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Printed Name

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Signature

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Date