

2020-2021 School Year Destin United Methodist Church

Travel Release Form

I (we) give _____ (Name of Child) permission to attend, to be transported by the DUMC Church Bus/Party Bus to Destin United Methodist Church or DMS, and participate in the youth ministry activities at Destin United Methodist Church and its events/retreats. I (we) recognize that membership and participation in the youth program is voluntary, and while every reasonable precaution will be taken for the safety and well being of the participants, there are certain risks inherent in trips away from home and church youth activities.

In the event of an emergency illness or injury to the child, the adult leaders of DUMC will make every reasonable effort to contact me (us) for permission to obtain emergency medical and/or dental care. However, if the circumstances do not permit, I (we) authorize and consent to such emergency medical and/or dental care and treatment as may be necessary for the prompt treatment of the illness or injury. I (we) further agree to be financially responsible for the cost of emergency treatment and agree to reimburse DUMC and/or the adult leaders for any expense incurred as a result of such emergency treatment.

By signing this form, I give consent for DUMC:

- **To use my child's picture for advertisements, social media, highlight videos, documentation.**
Transport my student(s)
Give medical assistance as needed
Attend school lunch with my student for this school year

Parent/Guardian Signature Date

During the time of this youth program, I (we) can be reached at the following telephone numbers:

_____ Telephone Number _____
Name of Contact

Name or Location

IMPORTANT: Emergency contacts other than a parent or guardian:

_____ Telephone Number _____
Name of Contact

WEDNESDAY NIGHT VIBE DINNER

It is our desire every Wednesday to provide each student to have a full, warm meal. In a perfect world, we would love to be able to provide these dinners to students at zero cost. However, we are unable to accommodate the full costs of providing free meals for students on Wednesday Nights. We did our best to last year to provide free meals, but it resulted in us having to cut back in other ministry areas. We are asking that you, as a parent, please partner with us in making sure that your student is able to have a meal on Wednesday Nights! The cost of a Wednesday Night dinner comes out to roughly \$3/student. **Below, we have listed some payment options so that you do not have to send your student with \$3 each week!** If you need assistance in paying for your student's meals, please email me, Nathan Sell, at nsell@destinumc.org. Thank you for your understanding, and partnership in ministry!

VIBE dinner payment plans

Each week we serve dinner for our students. Dinner for each week of VIBE is \$3.00. You may prepay for your student's meals in one of the following:

Fall semester: \$50

Full school year: \$100

please circle your choice

You may enclose cash or a check to DUMC Youth. If you need assistance with paying student meals, please contact Nathan Sell at nsell@destinumc.org.

Release and Waiver of Liability

This Release and waiver of Liability (the "Release") executed this _____ day of _____, year _____, by _____ (the "Parent(s)"), in favor of Destin United Methodist Church, Inc., its officers, employees, members and agents (hereinafter "DUMC").

The Parent(s) desires to enroll his/her/their child(ren) in the Youth Programs (hereinafter "programs") at DUMC. The Parent(s) understands that COVID-19 virus pandemic is occurring in our city and my/our child(ren) may be exposed unintentionally to this virus or other communicable diseases while attending a session at DUMC.

The Parent(s) understands that these activities may pose a risk of harm to their child(ren) and the Parent(s). The Parent(s) for themselves and their child(ren) do hereby freely, voluntarily and without duress execute this Release under the following terms:

1. **Waiver and Release.** Parent(s) does hereby release and forever discharge and hold harmless DUMC from any and all liability, claims and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from child(ren) and Parent(s) activity on the DUMC property. The Parent(s) understands and acknowledges that this Release discharges DUMC from any liability or claim that the Parent(s) and their child(ren) may have against DUMC with respect to any bodily injury, personal injury, illness, death or property damage that may result from the child(ren)'s participation in the programs at DUMC.

2. **Assumption of Risk.** The Parent(s) understands that participation in the DUMC programs may include exposure to viruses and communicable diseases including, but not limited to, the Novel Coronavirus. Parent(s) hereby expressly and specifically assumes the risk of injury or harm in these exposures and release DUMC from all liability for injury, illness, death or property damage resulting from the child(ren)'s participation in the DUMC programs.

4. **Insurance.** The Parent(s) understands that DUMC does not carry or maintain primary health, medical or disability insurance coverage for any child. Each Parent is expected and encouraged to obtain his or her own medical or health insurance coverage for their child(ren).

5. **Other.** Parent(s) expressly agrees that the Release is intended to be as broad and inclusive as permitted by Florida law and shall be governed by and interpreted in accord with Florida law. Parent(s) agrees that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

IN WITNESS WHEREOF, Parent(s) has executed this Release as of the day and year first above written.

Parent/Guardian's Signature _____