

**YOUTH GROUP REGISTRATION AND RELEASES**

Community of Hope Lutheran Church  
27817 SW Stafford RD Wilsonville. OR 97070

January 1 2013 to December 31 2013

Participant's Name: \_\_\_\_\_ Participant prefers to be called: \_\_\_\_\_

Birth Date: \_\_\_\_\_ School: \_\_\_\_\_ School Grade: \_\_\_\_\_

Participant's Primary Care-Givers: \_\_\_\_\_

Mailing Address(es): \_\_\_\_\_ Adult(s) Phone #'s \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Adult(s) email addresses: \_\_\_\_\_

Note: Communication about youth group events will often be done by email. *Please list emails that you check on a regular basis.*

Participant email address: \_\_\_\_\_ Participant Cell Phone # \_\_\_\_\_

In Case of Emergency, please contact \_\_\_\_\_ at \_\_\_\_\_

**PHOTO RELEASE:**

Community of Hope has a website where photos and videos from Youth Group events are periodically published. We also have a Youth group bulletin board where we sometimes post photos from events. It is Community of Hope Lutheran Church's policy that photos of children are never published with names or other identifying information.

Initial one:

\_\_\_\_\_ Yes, you can use pictures and videos of my child. I hereby Community of Hope Lutheran Church, the permission to use my child's likeness in photographs, video, and other media in any and all of its publications, including bulletin boards and website entries. I waive any right to royalties or other compensation arising or related to the use of the photographs or videos.

\_\_\_\_\_ No—please do not print or publish photos of videos of my child online or in church-related publications.

**GENERAL RELEASE:**

"I/We hereby grant permission for my/our child \_\_\_\_\_ to be a member of the Youth Group at Community of Hope Lutheran Church and to participate in activities arranged by the Youth Leadership in this regard from time to time. We recognize the importance of the commitment that he/she makes and that their participation as a part of a larger community calls for responsible behavior. Therefore, I/we agree that if this child engages in behavior which, in the judgment of the adult leaders, is not in the best interest of the trip or event, our/my child or any member of the group may, therefore, be sent home. I/We will assume full legal and financial responsibilities for such a return trip."

"I/We hereby release from any liability Community of Hope Lutheran Church and all of its personnel, employees, adult leaders and representatives from any claims for unintended or unexpected accidents which might occur during participation in youth group events or traveling to or from said events. In granting this permission and release, I/We specifically recognize that my child may from time to time be transported to events by private vehicles operated by advisors or volunteers not as agents, employees or representatives. In such regard, I/We specifically release and will hold harmless Community of Hope Lutheran Church, their officers, employees, agents and representatives from any and all liability which may arise as a result of such transportation whether or not organized by Community of Hope Lutheran Church."

\_\_\_\_\_ has my permission to go on all field trips and to all events with Community of Hope and its Youth Groups from January 1 2013 to December 31 2013 unless I specify otherwise in writing. *Note: Care-givers will be notified in advance about the dates and destinations of all trips.*

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent / Guardian

\_\_\_\_\_  
Date