

Parental Consent Form for Olivet Baptist Church

Participant's name: _____

Birth date: _____ Sex: _____

Parent/Guardian's name: _____

Home address: _____

Home phone : _____ Business phone: _____

By signing this agreement, I acknowledge the contagious nature of COVID-19 and that my child(ren) and I may be exposed to or infected by COVID-19 by participating in church activities. I also acknowledge that such exposure or infection may result in personal injury, illness, permanent disability, and death.

I understand that all church personnel and chaperones will make every effort to keep all children under their supervision safe from any harm including that which is not related to COVID-19.

I grant permission for my child to participate in any activity that may require transportation to a location away from the church.

I agree to hold harmless Olivet Baptist Church, its staff, leadership, and chaperones, from any problems that may arise from COVID-19 or other accidents.

Signature _____

Date _____