

Enrichment Class Emergency & Consent Form

Faith Baptist Church
350 N. Stephenson Ave. Peshtigo, WI 54157

Name of Student(s) _____

Emergency Contact	Emergency Phone
Father's work/cell #	Mother's work/cell #
Doctor's name	Doctor's phone
Dentist's name	Dentist's phone
Medical considerations or Allergies	

Consent

- _____ I give my permission for my children to participate in any activity sponsored by Faith Baptist Church.
- _____ I waive, release, and indemnify Faith Baptist Church, its agents, directors, officers, employees, and volunteers from all demands, claims, or liabilities, in law or in equity, which have arisen or may arise from any Enrichment activity and which involves any damage, loss, or injury to me, my children named on this form, or our property. In the event that I cannot be reached in an emergency during an Enrichment activity, I hereby give permission to the physician or dentist selected by the church leadership to secure proper medical treatment for any of my children as deemed necessary, at no expense to the church.
- _____ I give my permission for photos or videos to be taken of my child(ren) to be used for publicity purposes.

Student Conduct

- _____ I will support the policies, procedures, and disciplines of the Home School Enrichment classes. I will encourage and support the staff. I will bring concerns and suggestions to the attention of the teacher and/or Enrichment Committee. I will encourage my child in areas of respect, obedience, responsibility, orderliness, punctuality, and positive attitude. I pledge to support my child in complying with the Student Conduct policies.

Program Fee

- _____ I understand that **the first installment of one-half of tuition cost is due at time of registration and that payment in full is due on the first day of class.**

Parent's or Guardian's Signature

Date

Authorization to Drop off and/or Pick up Children

I authorize the following people (do not include yourself) to drop off and/or pick up my children from Home School Enrichment Classes at Faith Baptist Church:

Name	Relationship	Address	Phone
Name	Relationship	Address	Phone
Name	Relationship	Address	Phone
Name	Relationship	Address	Phone
Name	Relationship	Address	Phone

Signed: _____ Date: _____