

# ***Authorization and Release Form***

## **Participant Information *(Everyone)***

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Age: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State/Prov.: \_\_\_\_\_ Zip/Postal: \_\_\_\_\_  
Phone Number(s): (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

## **Emergency Contact Information *(Everyone)***

Emergency Contact #1: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_  
Medical Insurance Company: \_\_\_\_\_ Policy #: \_\_\_\_\_

## **Medical Release *(Only Minors)***

### **PARENT**

I give my permission for \_\_\_\_\_ to attend (circle only one):

**Junior High Family Camp** (June 21<sup>st</sup> – 25<sup>th</sup>, Mount Pleasant, PA)

**High School Camp** (June 28<sup>th</sup> – July 2<sup>nd</sup>, Sullivan, OH)      **Vision Week** (July 6<sup>th</sup> – 11<sup>th</sup>, Sullivan, OH)

**Talent Camps (Music, Drama, Writing)** (July 19<sup>th</sup> – 22<sup>nd</sup>, Gambier, OH)

**Mountain Top 2009** (July 23<sup>rd</sup> – 25<sup>th</sup>, Gambier, OH)      **Gospel Odyssey** (July 31<sup>st</sup> – August 8<sup>th</sup>, Ann Arbor, MI)

I also give permission for emergency medical care to be given if judged necessary by the adult supervisors during the above dates (all dates are for the year 2008).

Permission Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Relationship to minor: \_\_\_\_\_

Locality: \_\_\_\_\_ Registration Contact(s): \_\_\_\_\_

Daytime Phone: (\_\_\_\_) \_\_\_\_\_ Evening Phone: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

## **Participant Release *(Everyone)***

I hereby authorize *YoungSeekers* to record the appearance and/or performance of \_\_\_\_\_ (participant's name) and to edit these recordings into a broadcast, video/audio production, or website and to use and license other entities to use such recordings in any appropriate manner, including unrestricted use for purposes of publicity. I further acknowledge *YoungSeekers* owns all rights to the aforementioned recordings.

I hereby agree indemnify *YoungSeekers* for all loss, damage and liability whatsoever arising out of my appearance.

\_\_\_\_\_  
(Print Participant's Name)

\_\_\_\_\_  
(Participant's Signature)

\_\_\_\_\_  
(Date)

### **PARENT**

I am the parent and/or guardian of the above-named minor and I endorse the above statement in his/her behalf.

\_\_\_\_\_  
(Print Parent's Name)

\_\_\_\_\_  
(Parent's Signature)

\_\_\_\_\_  
(Date)