

Explore Faith Confirmation Class Registration & Release 2022 - 2023

Registration due by September 4th Questions? Contact Pastor Josh at 610-750-2688 or pastor@fcc-worcester.org

Confirmand's Information

Name:	Date of Birth:
Church Affiliation (if any)	Baptized? (circle one): Yes No Unsure
Parent(s)/Guardian(s) Information	
Name(s):	
Address:	Phone:
	Email:
Emergency Contacts	
1. Name:	Relationship to Confirmand:
Phone:	Email:
2. Name:	Relationship to Confirmand:
	Email:
Health Information	
Known Allergies (if any):	
•	al needs that may impact engagement in activities (if any):
Doctor's Name:	Phone:
	Policy Holder:
Group Number:	Account Number:

RELEASE AND WAIVER

I (We) the Parent(s)/Guardian(s) give permission for my(our) above-named Child to engage in the Confirmation Class 2022-2023 sponsored by the First Congregational Church in Worcester from September 2022 through May 2023.

I (We) understand that there are numerous risks associated with participation in any youth or social activity including bodily harm, injury or property damage. While the Church will strive to limit such risks, I (we) further understand that such injury or damage may be caused by circumstances or individuals over which the Church has only limited control or no control whatsoever.

I (we), and on behalf of my (our) Child, our heirs, estate, executor, administrator, and assignees, agree to release, hold harmless, defend and indemnify the First Congregational Church in Worcester, its trustees, officers, representatives, employees and volunteers, from and against any and all losses, damages, demands, liability or responsibility for bodily injury, damage or illness to my (our) Child arising out of their participation in confirmation activities sponsored by the Church.

Should my (our) Child require immediate or emergency medical care while engaged in an activity sponsored by the Church, in my (our) absence, I (we) hereby grant the Church authority to release my (our) Child for medical treatment to such medical personnel as the Church determines appropriate under the circumstances.

I (we) understand that with respect to any injury or illness that may occur in the course of the Planned Activities, I am (we are) solely responsible for making health insurance coverage available to my (our) Child. I (we) agree to provide sufficient health insurance coverage for my (our) Child and will rely on it exclusively to address any injury or illness that he or she may incur.

By signing below, I (we) represent that I am (we are) fully aware of and understand the terms and legal consequences of signing this Waiver and Release. I (we) intend this waiver and release to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Signature of Parent/Guardian	 Date	

FIRST CONGREGATIONAL CHURCH IN WORCESTER MEDIA RELEASE FORM

I, the undersigned, do hereby grant or deny permission to the First Congregational Church in Worcester, MA to use the image of myself or my child as marked by selection below. Such use includes the display, distribution, publication, transmission, or otherwise use of photographs, images and/or video taken of myself or my child for use in materials that include, but may not be limited to, printed materials such as brochures and newsletters, videos, and digital images such as those on the First Church website and Facebook page.

☐ Deny permission t	to use my image or my child's image.	
	OR	
☐ Grant permission to use my image or my child's image.		
Name of Child:	Name of Parent/Guardian:	
Signature of Parent/Guardian:	Date:	