



RELEASE OF LIABILITY FOR YOUTH MINISTRY

I, _____, give _____ permission to attend a Youth Aglow function at _____.

I, the undersigned, do release and hold harmless Youth Aglow; Aglow International, Inc. (a non-profit, non-denominational organization); its officers, directors, employees, agents, affiliates or subsidiaries; and/or, _____ the representative thereof, from any and all liability or claims arising out of the above said event regardless of negligence.

This release shall apply to any time during _____ or during transportation to/from said event.

Parent or Guardian (Husband) _____ Date _____
Parent or Guardian (Wife) _____ Date _____

MEDICAL INFORMATION

Please list any medications you are currently taking: _____ Please list any allergies you have: _____

Other pertinent information: _____

Doctor's Name _____ Address _____
Phone () _____

EMERGENCY CONTACT

Name _____ Relationship _____
Address _____ Phone () _____