

# Bigger and Better Scavenger Hunt Off-Campus Waiver Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

School: \_\_\_\_\_ Age: \_\_\_\_\_

Grade: \_\_\_\_\_ Driver (if known): \_\_\_\_\_

Parents/Guardians: \_\_\_\_\_

*I give permission for my above named student to leave Eastland Church campus with Eastland Student Ministry adult leaders and staff for this off-campus activity.*

*I understand that the group will be traveling in adult leader vehicles.*

*I hereby release Eastland Church, their staff and volunteers from liability for any injury or illness that my student may sustain during this activity. In the event of an emergency, I authorize an adult leader to act as an agent for me, to consent to any x-ray examination; medical, dental or surgical treatment; and hospital care advised and supervised by a physician, surgeon, or dentist (as appropriate) licensed to practice under the laws of the state where the services are rendered, either at a doctor's office or any hospital.*

*I acknowledge that all financial debts incurred are my responsibility and not that of Eastland Church, their staff, or volunteers.*

\_\_\_\_\_  
Signature of Parent or Guardian Date

\_\_\_\_\_  
Home Phone Mobile # or Pager

\_\_\_\_\_  
Insurance Name/Provider Insurance ID #

\_\_\_\_\_  
Insurance Policy # Group #

\_\_\_\_\_  
Additional Information (if needed)

**If you have any questions, contact the church office at 263-8917 or email Julie Dodson at [julie@eastland.org](mailto:julie@eastland.org).**