



Titan Christian Education

TitanChristianEd.org

Child's Name _____

Grade _____ Homeroom Teacher _____

Address _____

Email _____ Phone _____

Home Church (if applicable) _____

Permission and Liability Waiver

I recognize that certain risks and dangers may occur during Titan Christian Education or while walking to and from the program. These risks include, but are not limited to hazards of accidents, personal injury, and acts of a third person. In consideration of the benefits to be attained by my child in receiving Christian Education instruction, I assume all risks, and do hereby waive, release and forever discharge from any liability the building property owners, Triway Local Schools, and Titan Christian Education, and its board, teachers, and volunteers.

Medical Information and Release

If my child has medical conditions that Titan Christian Education teachers and volunteers should be aware of, please list and explain them below. If I cannot be reached, I hereby authorize Titan Christian Education permission to act on my behalf in a medical emergency.

I have carefully read the above, know its content, and I sign this release at my own free act.

Yes, I do give permission for the above named child to participate in Titan Christian Education and I assume all risks (as stated above) that may be encountered by my child attending the off-school-site Christian Education instruction. I also give medical release in case of an emergency.

No, I do not want my child to participate in Titan Christian Education at this time.

Parent Signature _____

Date _____

Parent Printed Name _____

I am interested in being a volunteer.

My child MAY (or) MAY NOT be photographed/videotaped for Titan Christian Education promotion.

Titan Christian Education is a
501(c)(3) Non-profit organization
Contact us:
TitanChristianEducation@gmail.com

Beth Acker, President
Kathryn Holmes, Vice President
Carla Lendrum, Secretary
Dave Warrick, Treasurer

**"Show me your ways, O Lord,
teach me your paths"**
- Psalm 25:4