

**PARENT / GUARDIAN OF A MINOR CONSENT AND HOLD HARMLESS FORM**

Name of activity: \_\_\_\_\_

Date of activity \_\_\_\_\_

Child's Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: (M) \_\_\_\_\_ (F) \_\_\_\_\_

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

Home Phone number: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Emergency contact / phone: \_\_\_\_\_

I, \_\_\_\_\_, (*printed name of parent / guardian*) being the parent or legal guardian of \_\_\_\_\_ (*printed name of minor*) have been informed of the above activity sponsored by Grand View Christian School and hereby give my consent for my minor child to participate in this activity.

I understand that all reasonable safety precautions will be taken by the leaders of this activity, and that the possibility of an unforeseen hazard does exist. I further agree not to hold Grand View Christian School, its leaders, employees, and volunteer staff liable for damages, losses, diseases, or injuries incurred by the minor listed on this form.

I also understand that my minor child is to be excluded from the following activities:

\_\_\_\_\_  
(If you do not want to exclude your minor child from any specific functions during this activity, please write none.)

Signature of parent / guardian: \_\_\_\_\_

Date signed: \_\_\_\_\_

.....  
Student (18 or older) – Please read and sign

I understand that all reasonable safety precautions will be taken by the leaders of this activity, and that the possibility of an unforeseen hazard does exist. I further agree not to hold Grand View Christian School, its leaders, employees, and volunteer staff liable for damages, losses, diseases, or injuries incurred by the minor listed on this form.

Signature of student (18 or older): \_\_\_\_\_

Date signed: \_\_\_\_\_

**Grand View Christian School  
2905 NE 46<sup>th</sup> Avenue  
Des Moines, IA 50317  
515-777-3977**