

Big Weekend 2019 Indemnity Form

I, _____ the parent / guardian of _____ will not hold any of the teachers and leaders of Cornerstone Church for any mishap whatsoever that might occur to my child while at the Big Weekend 2019 event. I understand that every care will be taken and the children will be supervised at all times. I further agree to the medical release as stated in the online registration process.

Signed _____ Date _____

NOTE:

Please bring this form with your child on the day they arrive at The Big Weekend.