

WINTER CAMP CONSENT FORM



*3rd - 6th July 2024
Swan Valley Adventure Camp
58 Yule Ave, Middle Swan*

**All info and the rego link can
be found via the website**

<http://faith.org.au/kinetic>

*If you have any questions or concerns please contact us at:
kinetic@faith.org.au*

This is to confirm that I, (name of parent/guardian) _____
hereby provide express consent for my child/children
(name of children) _____ to attend the following event
organised by Kinetic Youth Group of Faith Community Church.

“YARE Winter Camp” on the 3rd-6th July 2024.

I hereby agree that in the event of any injury, accident or mishap, NOT to hold Kinetic Youth Group of Faith Community Church responsible. However, the team at Kinetic shall adhere to the highest standards pertaining to the safety of your child/children.

I consent to any emergency medical treatment that may be administered to my child/children during any accidents/injuries. However, any oversight during the attempted procedure will not be the fault of Faith Community Church and I will not hold Faith Community Church liable for any outcome arising from the treatment.

Faith Community Church shall NOT be liable for any lost, stolen, misplaced or damaged items belonging to the child/children during the course of the event.

Parent Signature _____ Date _____