

Camp Meeting Children's Divisions

July 28, 2021 to July 31, 2021

WAIVER

Name of Sponsoring Entity: **British Columbia Conference (Seventh-day Adventist Church)**

Church _____

Parent(s)/Guardian(s) _____

List all Children and their (ages) _____

Phone: _____ (please check - ____ Home or ____ Cell)

Contact Number #2: _____ (please check - ____ Home or ____ Cell)

Email Address _____

Address _____

_____ I give permission for the minor(s) listed above to participate in the Children's Divisions **Virtual** Events with the Sponsoring Entity.

Further, I/we understand by agreeing to allow the minor to participate that the Online Activities identified above may involve certain risks such as exposure to bullying, misappropriation of personal information and other risks associated with online activities, including inappropriate images/content. In addition, the Sponsoring Entity stated above cannot guarantee that participation in this online activity will not expose your hardware to viruses, and other malicious software or code-based tools. I/we still wish to proceed with the activities described herein. I/we do so and assume all risks and understanding of the risks involved. I/we fully understand that the sponsoring organization cannot fully protect me, my child, or my computer systems, including software and hardware. Any technical support for my computer systems, the use of any software on my computer systems or accessed through the internet are my sole responsibility. I understand that supervision of what my child accesses online, the information they share, and any messages with volunteers, employees, other parents and other minors are my responsibility. I agree to fully supervise all activities the minor participates in and to screen and assume responsibility for all messages my child sends and receives. I understand that video's and or images of the minor(s) (or adult participants) named on this Waiver may be posted online for the purpose of promoting Pathfinder/Adventurer Programs of the Seventh-day Adventist Church - BC Conference (SDABCC).

I have read and understand the foregoing.

(Adult Participant or)

Parent/Guardian Signature: _____ Date: _____

(Participant or) Parent/Guardian Name Printed: _____

Please email this form with parental signature(s) to childrensministries@bcadventist.ca This form is due no later than the 5 pm on Tuesday, July 27, 2021. Include all family members

****Only VALID digital signatures accepted using AdobeSign @ <https://acrobat.adobe.com/> or DocuSign @ <https://www.docusign.com/products/electronic-signature>**