

Grace Bible Church - Consent & Release Form

I, _____, hereby consent to my child, _____, participating in the **Sky Zone Trampoline Park** sponsored by Grace Bible Church of Hudson, Florida (hereafter, "the Church") on **Jan. 10, 2026**. I certify that my child is able to participate in these activities. If my child has medical conditions, which may be relevant to a physician in the event of an emergency, I have listed them below. In the event an emergency occurs, I may be reached at the telephone number listed below. If I cannot be reached, I hereby authorize **Charles VanWey** or **Sean Maniscalco** (adult sponsors to make emergency medical decisions for my child. If there are any activities I do not want my child involved in, I have listed them below.

I understand and hereby agree to assume all of the risks, which may be encountered on said activity, including transportation to and from the event and activities preliminary and subsequent thereto. I do hereby agree to hold the Church and it's officers, agents, and employees, harmless from any and all liability, actions, causes of actions, claims, expenses, and damages on account of injury to my child or property, even injury resulting in death, which I now have or which may arise in the future in connection with the activity or participation in any other associated activities.

I expressly agree that this release, waiver, and indemnity agreement is intended to be broad and inclusive as permitted by the law of the state of Florida and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This release contains the entire agreement between parties thereto, and the terms of the release are contractual and not a mere recital.

I further state that **I have carefully read the foregoing release and know the contents thereof and I sign this release as my own free act.** This is a legally binding agreement, which I have read and understood.

I understand picture will be taking and used on various items, such as facebook, website or other items

Medical Conditions to be aware of:

Physical restrictions:

I do not want my child to participate in the following:

Parent/Guardian Signature Date (____) _____
Emergency Phone
Parent email: _____

In case of emergency, please contact
Pastor Sean Maniscalco at (727) 271-4792

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Where: Meet At the Church

When: Saturday, Jan. 10th

Time: 4:15 - 9:00 pm

The van will leave promptly at 4:30pm

**THERE IS AN ADDITION RELEASE FORM FROM
SKY ZONE**

IT MUST BE FILLED OUT ONLINE

GO TO: SKYZONE.COM/CLEARWATER

**CLICK ON: ONLINE WAIVER THEN CLICK ON SIGN
YOUR WAIVER THEN CLICK ON MYSELF & CHILDREN**

PLEASE WEAR A WHITE OR BRIGHT COLORED SHIRT

**PLEASE SEND ME A TEXT AFTER YOU HAVE COMPLETED THE
ONLINE WAIVER (727-271-4792)**

COST: \$21.00



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