

## Big Weekend 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 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.