

Parents Night Out

First Baptist Church, Malvern, AR would like to invite you to participate in our Parents Night Out Event on Saturday December 8, 2018. We will be able to accommodate ages 4-12 (children must be potty trained). We will attend to their every need throughout the event, including a meal. Activities for the kids will include games, crafts, movies, music and a bounce house. It's a time for parents to drop off your kids and rest, rejuvenate, run errands, go on a date, or get some Christmas shopping done!

**You must register online at fbcmalvern.org
by December 1st to participate.**

Where: First Baptist Church, Malvern, AR

When: Saturday, December 8, 2018 5PM-9PM

Ages: 4-12

Cost: \$10 per child (\$30 max per family)

If you have any further questions please contact our office.



531 S. Main St.

Malvern, AR 72104

501-332-5263

Fbcmalvern.org



PARENTS NIGHT OUT PARTICIPANT RELEASE AND WAIVER FORM

Every participant must have a completed and signed release form to be turned in before or on the day of event.

Participant's Name _____ Date of Birth _____ Age _____

Address _____ City, State, Zip _____

Guardian's Name _____ Phone _____

In the event of an emergency the parent/guardian will be contacted first. Please provide a second contact in case they can not be reached.

Emergency Contact _____ Relationship _____ Phone _____

Please list any medical/physical limitations (allergies, etc.) or other concerns pertaining to your child:

Parents Night Out Rules and Regulations 1. Everyone must follow the instructions of Parents Night Out (PNO) Staff. 2. All participants must take part in all scheduled activities.

Accident Release, First Aid, Media and Financial Responsibility Wavier Please read and sign below.

Waiver forms must be signed and dated by parent or guardian. I understand that the PNO event is provided by the First Baptist Church, Malvern Ar. (FBCM), and I understand the inherent dangers involved with my child's participation in these programs, including the risk of personal injury and/or damage to my child and/or my property while participating in these programs. I further understand and acknowledge that the participants in such programs are not covered under insurance of FBCM and that FBCM will not allow participation in these programs absent my signing this release. I authorize and grant permission for a representative of FBCM to treat minor injuries including scrapes, small cuts, bumps, and bruises. I authorize and grant permission for a representative of FBCM to obtain emergency medical care from any licensed physician or hospital and/or medical clinic should my child become ill or injured while participating in these activities away from home or at other times when neither parent nor guardian is available to grant authorization for emergency treatment. I therefore freely and voluntarily execute this release with such knowledge, assume the risk of personal injury and/or property loss arising from or in any way connected with participation in any PNO event offered by FBCM. I hereby release and discharge FBCM and any and all agents of FBCM from any liability, claim, cause of action, demand or damages from injury or damages of any kind to my child or my property as a result of participation in the PNO events of FBCM. I grant permission and understand that photos and other images taken during this event could be used in print advertisement and other forms of media .

I have read the Parents Night Out rules and understand that my child and I must adhere to them.

Parent/Guardian Signature _____ Date _____