



ST. PAUL LUTHERAN CHURCH & PRESCHOOL  
 115 CENTRAL DR, AMHERST  
 440-988-4157 CHURCH  
 WEBSITE [WWW.STPAULAMHERST.COM](http://WWW.STPAULAMHERST.COM)  
 EMAIL:  
[CHURCHOFFICE@STPAULAMHERST.COM](mailto:CHURCHOFFICE@STPAULAMHERST.COM)

PARENTS OR GUARDIAN NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**Your email will only be used to send reminders and for future event invites**

CHILD/CHILDREN:	AGE
_____	_____
_____	_____
_____	_____

CHILD/CHILDREN:	AGE
_____	_____
_____	_____
_____	_____

OUR FAMILY WILL ATTEND ON

\_\_\_\_ JULY 10<sup>TH</sup>  
 \_\_\_\_ JULY 17<sup>TH</sup>  
 \_\_\_\_ JULY 24<sup>TH</sup>  
 \_\_\_\_ JULY 31<sup>ST</sup>

**Parent/Guardian of Participant's Agreement & Release**

1. I warrant that my child/children is in good health and is capable of safely using inflatables(s) and other activities available at this event.
2. I am aware of all risks associated with inflatable jumpers and waterslides.
3. The storage of valuables is at my own risk
4. I expressly agree and promise to accept and assume all the risks existing in this activity. The participation of the children under my care in this activity is purely voluntary and I elect to have them participate.
5. I hereby voluntarily release, forever discharge and agree to indemnify and hold harmless the event host, sponsors, staff, and volunteers for all claims, demands, or causes of action, which are in any way connected with my and/or child's participation in this activity or my use of the equipment or facilities.
6. **Photo release - I give permission to St. Paul Lutheran Church to photograph my family, child(ren).** Photographs will be shared with the congregation and sponsors. Some photos may be used on Facebook or website with permission.

**Registration forms may be dropped off in the church drop box under the portico or emailed to [churchoffice@stpaulamherst.com](mailto:churchoffice@stpaulamherst.com)**

By my signature below, I acknowledge that I have read the forgoing, understand it and agree to the terms.

Signature of Parent or Guardian \_\_\_\_\_  
 Initials \_\_\_\_\_ 7/10/24 \_\_\_\_\_ 7/17/24 \_\_\_\_\_ 7/24/24 \_\_\_\_\_ 7/31/24