## 2025 CBCM Retreat, Youth Program - Parental Consent Form

## **Activity Information**

Name of sponsoring organization:

Chinese Bible Church of Maryland

Address: 4414 Muncaster Mill Road, Rockville, MD 20853

Telephone: 301-924-4855 Name of sponsor's coordinator:

Michael Chen: 301-704-8066, Laurence Jao: 240-308-9498

Description of activity:

Chinese Bible Church of Maryland Adult Retreat

Date(s) and location of activity:

Saturday, May 24, 2025 through Monday, May 26, 2025. The retreat will be held at Haverford College, Pennsylvania in parallel with the Mandarin/Cantonese/English adult congregational retreats.

## **Participant Information**

(To be completed by participant or authorized guardian)

Name of participant:	
Name of parents/guardians:	
Address:	Telephone:
Name of emergency contact:	
Telephone (daytime):	Telephone (evening):
List of allergies or medical conditions:	
Is sponsor authorized to approve medical tre	atment?  Yes  No
Is participant covered by personal/family me	dical insurance?
If yes, name of insurer:	<del> </del>
	<del> </del>
guardians, if Participant is a minor), and may resubodily injury, death, emotional injury, personal injury opportunity to participate in the activity described minor) acknowledges and accepts the risks of injury. The Participant (or parent/guardian) accepts personal Activity or during transportation to and from the accepts the results of the participant	scribed above involves risk to the Participant (and to Participant's parents or all tin various types of injury including, but not limited to, the following: sickness cury, property damage and financial damage. In consideration for the above (the "Activity"), the Participant (or parent/guardian if Participant is a cury associated with participation in and transportation to and from the Activity. onal financial responsibility for any injury or other loss sustained during the ctivity, as well as for any medical treatment rendered to the Participant that is es, volunteers, or any other representatives (collectively referred to hereinafte
for any injury arising directly or indirectly out of the injury arises out of the negligence of the Activity S If a dispute over this agreement or any claim for a matter through a mutually acceptable alternative.	lamages arises, the Participant (or parent/guardian) agrees to resolve the dispute resolution process. If the Participant (or parent/guardian) and the ss, the dispute will be submitted to a three-member arbitration panel for
Signature:	Date:
Signature:	Date:
Signature:	Date:

(Participant and/or ALL parent/guardians if participant is a minor)

In case of an emergency, you may contact (please write down these numbers):

Michael Chen: 301-704-8066, Laurence Jao: 240-308-9498