



# 2024 TRUTH QUEST "TRUTH & FREEDOM" REGISTRATION FORM

148 S. Marina St. Prescott, Az 86303 | www.truthquestprescott.org | (928) 778-9790

**First & Last Name\*** \_\_\_\_\_ Circle one: M/F Age \_\_\_\_\_

Address (mailing) \_\_\_\_\_ Unit # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Church (no abbreviations) \_\_\_\_\_

Grade in Fall 2023 (6<sup>th</sup>-12<sup>th</sup>) \_\_\_\_\_

Student Email (Optional) \_\_\_\_\_



**Parent First & Last Name:\*** \_\_\_\_\_

Parent Phone\* \_\_\_\_\_

Parent Email (Optional) \_\_\_\_\_

**Emergency Contact Name:\*** \_\_\_\_\_ **Phone:\*** \_\_\_\_\_

Initial box if your child does NOT have permission to receive over-the-counter medications at Truth Quest:

Notes:

Does participant have any medical conditions or allergies that we need to be aware of? \_\_\_\_\_

If so, explain: \_\_\_\_\_

I do hereby release, forever discharge and agree to hold harmless Solid Rock Christian Fellowship, the directors, the employees, volunteers and agents thereof, from any and all liability, claims or demands for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the participant that occur while said person is participating in the above described activity, including recreation, including for any liability sustained by said acts of said participant, including expenses incurred attendant thereto. I understand that Truth Quest is an open campus event. Also please note by signing this you are authorizing the possible photographing or videotaping of your child during various events.

**Participant Signature:\*** \_\_\_\_\_ **Date:** \_\_\_\_\_, 2024

**FOR STUDENTS: Parent Signature\*** \_\_\_\_\_ **Date:** \_\_\_\_\_, 2024

**All fields marker \* are required**