Lebanon Church
An Evangelical Presbyterian Church

2800 Old Elizabeth Road
West Mifflin, PA 15122
Office: 412-466-7184

Parent's Night Out Registration

Event Date: Friday, December 11, 2026 5:00 pm – 8:00 pm

Registration Ends December 4th

Child's Information: *(an individual form is required for EACH child participating)*

Name of Child: _____

Home Address : _____

City : _____ State : _____ Zip : _____

Birthdate: _____ Age: _____ Sex: Male ____ or Female____

Parent & Contact Information:

Mothers Name: _____ Fathers Name: _____

Home Phone: _____ Home Phone: _____

Cell Phone: _____ Cell Phone: _____

Email: _____ Email: _____

Emergency Contact: *To be used if the person or persons above cannot be reached*

Name:_____ Relationship to Child: _____

Cell Phone: _____

List all Allergies / Dietary Restrictions:

PLEASE SIGN THE WAIVER FORM ON THE BACK!

RETURN TO CHURCH OFFICE OR EMAIL TO:
Lebanonpresbyterianchurch@gmail.com

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WAIVER/ RELEASE FORM

I have been informed of the details regarding Parent's Night Out and I hereby give my permission for my son/daughter to participate in the overall activities of this event. I understand that all reasonable safety precautions will be taken at all times by the leadership during the events and activities. I understand, however, that there is the possibility of unforeseen hazards and are keenly aware that there is always the inherent possibility of risk involved. I understand that unforeseen hazards including, but not limited to serious bodily injury may occur. I also acknowledge that participation in Parents Night Out could lead to possible exposure/illness of infectious diseases including COVID-19. I agree not to hold Lebanon Church, its leaders, employees, and volunteer staff liable for damages, losses, disease, or injuries sustained by the subject of this form; and I agree to waive any claim or any lawsuit against Lebanon Church, its leaders, its employees, or its volunteer staff. In addition I give our permission for photos and videos of the subject of this release to be used in presentations, promotional materials in print or online for the ministry of Lebanon Church.

I have carefully read the Registration and the Waiver/ Release Form and fully understand their contents. I am aware that this contract fully releases Lebanon Church and its leaders, employees, and volunteer staff from liability; and I sign it of my own free will.

Parental Signature : _____ Date: _____

Please Return by 12/4/2026