



TGM PARENT/GUARDIAN CONSENT FORM

About The Giving Methodist (TGM)

Good Friday marks the ultimate gift that Christ gave for Man. This Lent, share your time, give financial gift or be a voice for the vulnerable. Be a part of The Giving Methodist as it takes place from 6 March to 13 April 2019.

Give in ways, big or small, and change lives. Give because a life of giving exemplifies Christ. Freely you have received; freely give.

Your Child's Involvement:

Volunteer for a community blessing project(s) and/or activity island-wide at

MWS Centre: Please specify _____

Methodist Church: Please specify _____

For more details visit www.thegivingmethodist.sg.



I, _____, the parent/guardian* of
_____ (name of child, NRIC No/Passport No)
agree to my child's participation in The Giving Methodist (TGM).

Discharge of liability

I understand, acknowledge and agree that MWS will take all reasonable steps to ensure safety for all participants but in the event of any accident, injury, loss or damage whether directly or indirectly by/to my child or other person(s) or other organization(s) that may occur in the course of, or as a result of my participation in the Centre/Programme, I agree to release and discharge MWS and its staff, volunteers, clients, partners and/or any other agents from all demands, liabilities, claims, costs, charges and expenses.

Consent to collection, use and disclosure of personal data of my child/ ward

I consent to MWS collecting, using and disclosing my child's data provided in the registration form on www.thegivingmethodist.sg for the purposes of:

- (i) assessing and deciding on accepting my child into the TGM Give Time 2019 segment;*
- (ii) sending my child further information about the TGM Give Time 2019 segment and/or related programmes; and*
- (iii) where necessary, disclosing to third parties for the organisation and/or execution of the TGM Give Time 2019 segment.*

By providing MWS with my child's personal data, I confirm that I understand and agree that such personal data will be subject to the terms and conditions found in the Privacy Policy on www.thegivingmethodist.sg.

I also expressly consent to the disclosure, use and publication of my child's image, name, photograph and/or other particulars or information in any publicity and marketing materials carried out by MWS.



I have read, acknowledged and agree to the conditions of the sections titled “Discharge of Liability” and “Consent to collection, use and disclosure of personal data of my child”.

Parent’s/Guardian’s* Signature & Date

Name of Parent /Guardian*: _____

NRIC No. Of Parent/Guardian*: _____

Contact No. Of Parent/Guardian*: _____

**Delete accordingly*