

Freedom Christian Center

7250 Lake Andrew Drive | Melbourne, FL 32940 | 321.622.6999

LIABILITY RELEASE FOR FREEDOM CHRISTIAN CENTER (Minor Child)

l, (parent name)		_, hereby grant permission for my minor
child (name)	to rece	eive personal ministry from the team
members of Freedom Christi	an Center (FCC).	
to provide personal ministry meeting and that none of the only to offer biblical spiritua that makes no charge for its	y. We understand that this s ne team members are licensed I ministry. We understand tha	tian Center (FCC) have voluntarily agreed session is not a professional counseling d counselors. The team members serve at FCC is a non-profit Florida Corporation t these team members are, to the best of dom in life.
		ce of our own initiative and that we are help that we might receive from the team
We understand that if ministrate as follows:	ry is received from FCC, the te	am is committed to confidentiality except
•	n a committed relationship witl stors of FCC, so as to further th	h FCC, the information may be shared as he healing process.
		e request of another church or bona fide y receive an appropriate status report as
3. If needed, parent may	y be informed of the ministry p	rocess.
	amage of any kind that may aris	dership, and its team members free from se as a result of assistance which has been
	this disclaimer and release of line it, and have executed it as our	•
Signature	(parent)	Date

Date

Signature (minor child)