

# Rock the Universe

## PCH Students @ Rock the Universe 2026

**Date:** Saturday, January 24, 2026

**Location:** Universal Studios, 6000 Universal Blvd, Orlando, FL 32819.

**Details:** Students and families are gonna GET ROCKED with some of the best Christian music and theme park rides at Florida's Universal Studios! We will depart from PCH at 2 p.m. Park opens at 4 p.m. and closes at 1 p.m. We'll close the park down and then (tentatively) return to PCH by 2:30 a.m.

**Cost =** Ticket costs are \$89.99 per student (Cost is covered for those students who worked a minimum of 10 hours at our Pumpkin Patch/Unloading/Fall Festival) Unlimited Express Passes are \$39.99 per student. Fees can be paid at this [link](#).

**Students should bring extra money for dinner and any snacks/souvenirs!**

Participant Name

Participant Birthdate

Participant (and Parent, if minor) Phone #(s)

Participant (and Parent, if minor) Email Address(es)

**CONSENT:** I am the participant or parent and legal guardian of the minor child named below. I hereby give permission for my child to attend the above excursion with staff from Presbyterian Church in the Highlands (PCH) under the supervision of staff and volunteers from PCH and to be transported to and from the listed location(s) and to and from any necessary stops in the church bus and/or in personal vehicles owned and operated by approved volunteers.

Adult Participant OR Parent Initial

**RELEASE:** In consideration of me/my child being able to participate in the above described activity, I hereby release and agree to hold harmless PCH and its officers, directors, employees, administrators, and agents, including, without limitation, any PCH volunteers, from any and all liability, claims, causes of action, damages and demands whatsoever, including without limitation, any and all claims or causes of action for personal injury, sickness, or death which may be incurred by me/my child resulting from my/my child's participation in above described activities, including, without limitation, transportation to and from the excursions.

Adult Participant OR Parent Initial

**EMERGENCY AUTHORIZATION:** I hereby authorize and appoint Jared Edgar and/or other adult leaders of PCH in whose care me/my minor child has been entrusted, to arrange for and consent to any emergency or ordinary and necessary medical care or treatment, for me/my said child as a result of any accident or illness in the event I cannot be located or contacted by the medical treatment provider. I understand and agree that I shall be liable for all costs and expenses incurred in connection with such medical care or treatment rendered to me/my said child pursuant to this authorization.

Adult Participant OR Parent Initial

**DISCIPLINE:** I agree that if the subject of this release has to return home for severe discipline violations, it will be at my/our expense.

Adult Participant OR Parent Initial



**PHOTO AND VIDEO: I/We consent to the use of any video images or photographs (digital or conventional) that may be taken of the subject of this release during these events to be used for video recaps, in social media, or other appropriate media as PCH sees fit.**

Adult Participant OR Parent Initial

Today's Date

Name of Adult Participant OR Parent Signing Below

X \_\_\_\_\_



# Signature Certificate

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### Audit

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