

WESTOVER BAPTIST CHURCH YOUTH
Medical release and consent form
Effective for the calendar year of 2015

Please print in ink.

Name: _____ Age _____ Birthday _____
Last First Middle

Year in school _____ Parent's E-mail _____

Address _____ City _____ State _____ Zip _____

Medical Insurance company _____ Policy # _____

Mother's name _____ Phone: Home _____ Other _____

Father's name _____ Phone: Home _____ Other _____

Emergency contact _____ Phone: Home _____ Work _____

Physician _____ Office phone _____

Dentist _____ Office phone _____

Please describe any physical and/or psychological ailment, illness, weakness, limitation, handicap, disability, or condition to which your child is subject. Please list names of medications and dosages that may need to be taken. _____

Check the following areas of concern for this student. If necessary, add another page with details.

1. Rate your child's swimming ability. 0-----5-----10
Very poor Fair Excellent

2. Does your child have allergies to
 _____ Pollens _____ Medications _____ Food _____ Insect bites

3. Does your child suffer from, or has ever experienced, or is being treated currently for any of the following:
 _____ Asthma _____ Epilepsy/seizure disorder _____ Heart trouble _____ Diabetes
 _____ Frequently upset stomach _____ Physical handicap

4. Should this child's activities be restricted for any reason? If "yes" please explain.

In order to achieve desired results of an activity, it is a necessity to have rules. Westover Baptist church has rules of conduct to which students are expected to conform. Very briefly listed:

No possession or use of alcohol, drugs, or tobacco.

No students drive on youth events.

No fighting, weapons, fireworks, lighter, or explosives.

No offensive or immodest clothing.

No personal devices like MP3 players, DVD players, etc...

Cell phone use is restricted and allowed at allotted times only.

No student is allowed to ride with another student driver unless the parent has given prior approval.

Respecting and adhering to adult leaders.

Your signature indicates your approval of these conditions.

Student signature: _____ Date: _____

Activities may include, but are not limited to: cookouts, boating, water skiing, swimming, basketball, roller-skating, rollerbladding, games in the park, soccer, broomball, ice skating, volleyball, softball, baseball, camping, downhill skiing, snowboarding, hiking, biking, concerts, Bible studies, golfing, miniature gold, and hayrides. *Note: If you desire to limit your child's participation in any particular event, please submit your wishes in writing to the church youth pastor prior to that event.*

This consent form gives permission to seek whatever medical attention is deemed necessary, and releases the Church and its staff of any liability against personal losses of the child. I have legal custody of the student named above, a minor, and have given my consent for him/her to attend events being organized by the church. I understand that there are inherent risks involved in any ministry or athletic event, and I hereby release the church, its pastors, employees, agents, and volunteer workers from any and all liability of any injury, loss, or damage to persons or property that may occur during the course of my child's involvement... In the event treatment is required from a physician and/or hospital personnel designated by the church, I agree to hold such person free and harmless of any claims, demands, or suits of damages arising from the giving of such consent. I also acknowledge that I will be ultimately responsible for the cost of any medical care that should the cost of that medical claim care not be reimbursed by the health insurance provider.

My child (named above) has my permission to attend all youth activities sponsored by Westover Baptist Church for the calendar year of 2015.

Parent/Guardian signature: _____ Date: _____