

Medical, Liability, and Info Release Form

for all New Covenant Middle School, High School, & College-age activities

Occurring between August 1, 2011 and August 31, 2012

Don't turn in until completely filled out-Don't turn in until completely filled out

STUDENT NAME _____ STUDENT PHONE (____) _____ Texting? Y or N

ADDRESS _____ CITY _____ ZIP _____

BIRTHDAY ____/____/____ AGE _____ GRADE for 2011/12 _____ SCHOOL _____

(VISITORS ONLY) FRIEND OF _____

HEALTH HISTORY AND INFORMATION:

Allergies: Insect Stings Drugs Hay Fever Other allergies _____

Other Conditions: Heart Condition Chronic asthma Epilepsy Diabetes Other _____

If you checked any of the above, please give details on the back of this sheet (i.e. include normal treatment of allergic reactions)

Date of last tetanus shot: _____ (REQUIRED!) Name and dosage of any medications that must be taken: _____

Permission to administer OTC medication (i.e. Tylenol, Advil, Pepto-Bismol, Dramamine, etc) as needed: No Yes

Any swimming or activity restrictions: No Yes (If "yes", explain) _____

DOCTOR _____ CITY _____ PHONE (____) _____

HEALTH INSURANCE

Do you have health insurance? No Yes (if "no" skip this section)

Insurance Company Name: _____ Insurance Company Phone#: (____) _____

Policy Number: _____ Name of Insured (usually head of household): _____

Place of Employment: _____ Employment Phone #: (____) _____

Parent or Guardian Signature required below for Middle School & High School

MEDICAL RELEASE

"In the event that I cannot be reached in an emergency, I hereby give my permission to the physician or dentist selected by the church leadership to hospitalize, to secure proper treatment, and/or order an injection, anesthesia, or surgery for the minor listed on this form as deemed necessary."

PHOTO AND INFORMATION RELEASE

"I hereby give permission for the use of pictures or video/audio recordings of the minor listed on this form for the purposes of promoting and reporting NCBC events, including on NCBC websites, without compensation to me or the minor. I agree all pictures and recordings remain NCBC property. I release NCBC from any liability arising out of the use of such pictures or recordings. I also give permission for use of pictures and contact information to be displayed in printed materials or on the website facebook."

LIABILITY RELEASE Every activity sponsored by this church is carefully planned and adequately supervised by mature adults. However, even with the best of planning and precaution, unforeseen events can occur. Knowing this... "I agree to assume and accept all risks and hazards inherent in church-related social activities including off-site events (See Youth Policy Manual for details). I also agree not to hold this church or its employees or volunteer assistants liable for damages, losses, or injuries. I understand that I am signing for the minor listed on this form and in my own capacity as parent or legal guardian and the signature is for medical, liability and photo/information release."

(Below: sponsors or college-age people only need sign & date)

Signature(s) of parent or legal guardian(s) _____

Date ____/____/____

Date ____/____/____

Print Name(s) of parent or legal guardian(s) _____

Relationship to minor _____

Emergency Phone #(s) _____