Please Fill Out Both Sides

PARENTAL CONSENT FORM

for Wednesdays, Weekend Youth Activities & All Events 2018-2019 Please fill out this entire form in ink.

Student Name	Age	Birth Date	
Address	Pho	Phone	
City	State2	Zip Code	
School	Grade in (Grade in (or just completed)	
Parent(s) phone number (s)			
To whom it may concern:			
The undersigned does hereby give pe	ermission for our (my) child,		
	NAME OF CHILD	,	
to attend and participate in activities	sponsored by South Metro Vine	eyard Church.	
We (I) authorize an adult, in who examination, anesthetic, medical, surbe rendered to the minor under the physician or dentist licensed under tho of a licensed hospital, whether such physician or at said hospital. The undersigned shall be liable connection with such medical and deto this authorization.	rgical or dental diagnosis or tree e general or special supervision e provisions of the Medical Pra h diagnosis or treatment is re e and agree(s) to pay all cos	eatment, and hospital care, to on and on the advice of any actice Act on the medical staff endered at the office of said ts and expenses incurred in	
Should it be necessary for our (methe undersigned shall assume all trans	· ·	medical reasons or otherwise,	
The undersigned does also hereb designated by the adult in whose participating in activities sponsored by	care the minor has been er	ntrusted while attending the	
•	No PARTICIPAN	NT DATE	
Insurance Company	FATHER	DATE	
Policy Number	MOTHER	DATE	
Emergency Phone Nos.			
	LEGAL GUA	ARDIAN DATE	

On the reverse side of this page, please list any allergies or special medical problems your child may have. Thank you.

Please Fill Out Both Sides

LIABILITY RELEASE FORM

for Wednesdays, Weekend Youth Activities & All Events 2018-2019 Please fill out this entire form in ink.

Release of All Claims

In consideration for being accepted by South Metro Vineyard Church for participation in any or all Wednesday and Sunday Youth evenings/events/trips/activities, we (I), being 21 years of age or older, do for ourselves (myself) [and for and on behalf of my child-participant if said child is not 21 years of age or older] do hereby release, forever discharge, and agree to hold harmless South Metro Vineyard Church and the directors thereof from any and all liability, claims or demands for personal injury, sickness or death, damage and expense as a result of participation in recreation and work activities involved therein.

Further, authorization and permission is hereby given to said church to furnish any necessary transportation, food and lodging for this participant.

The undersigned further hereby agree to hold harmless and indemnify said church, its directors, employees and agents, for any liability sustained by said church as the result of the negligent, willful or intentional acts of said participant, including expenses incurred attendant thereto.

If the participant has not attained the age of 21 years:

We (I) are the parent(s) or legal guardian(s) of this participant, and hereby grant our (my) permission for him (her) to participate fully in said trip, and hereby give our (my permission to take said participant to a doctor or hospital and hereby authorize medical treatment, including but not in limitation to emergency surgery or medical treatment, and assume the responsibility of all medical bills, If any.

Further, should it be necessary for the participant to return home due to medical reason, disciplinary action or otherwise, we (I) hereby assume all transportation costs.

List Medicines & Allergies	Only participant need sign if 21 years of age or older. If under 21, both parents must sign unless parents are separated or divorced, in which case the custodial parent must sign.	
	FATHER	DATE
	MOTHER	DATE
	LEGAL GUARDIAN	DATE
	PARTICIPANT, IF AGE 21	DATE

TRIP PARTICIPANT ONLY

I have read the foregoing and understand the rules of conduct for participants and will abide by them as well as the directions of the leadership of the trip.