

Northpark Community Church

Parental consent, Release of Liability and Medical Authorization

Parents and legal guardians of minor youth are asked to complete this form and return it to the church. The information is designed to assist the church in providing for the safety of youth during church –sponsored events.

Information (please print):

Name _____ DOB _____
Address _____ City/Zip _____
Father's Name _____ Mother's Name _____
Parent's Home Phone # _____ Work _____
E-mail _____
Insurance _____ Policy # _____
Student's Doctor _____ Dr. Phone _____

Parental Consent

I, the undersigned, permit my child to participate in all regularly scheduled Northpark Community Church (NCC) and youth activities..

Release of Liability

I release and hold harmless NCC and their group leaders from liability and from all actions or claims that I or my child now or hereafter may have, for damage and injury to my child, or to persons or property.

Medical Authorization

In case of a medical emergency, I give permission to NCC and their leaders to order treatment for my child. This includes necessary medical treatment or X-rays. I understand that an immediate contact attempt will be made to me. I understand that NCC and its leaders will not be responsible for medical expenses incurred, but that such expenses will be my responsibility.

Medical Questionnaire

Is your student allergic to any type of medication? Yes/No

(if yes, explain) _____

Is your student taking ongoing prescription medication? Yes/No

(if yes, explain) _____

Does your student have a drug/alcohol problem? Yes/no

(if yes, explain) _____

Does your student require a special diet? Yes/No (if yes, explain)

Does your student ever sleepwalk? Yes/No

Can your student swim? Yes/No

Does your student have any physical or emotional handicap, which would prevent him/her from participating in normal rigorous activities? (if yes, explain) _____

Signature of Parent of Guardian _____ Date _____

As a Youth participant, I understand that generally accepted rules are in effect. I agree that I will: 1. Follow the guidelines and cooperate with leaders, 2. Not leave the group locations without prior permission, 3. Have an incredible time!

Student's Signature _____

Date _____